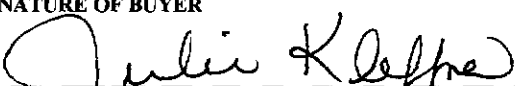
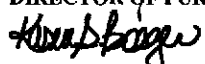




NOTICE OF AWARD

State Of Missouri
Office Of Administration
Division Of Purchasing
PO Box 809
Jefferson City, MO 65102-0809
<http://oa.mo.gov/purchasing>

SOLICITATION NUMBER RFPS30034901700042	CONTRACT TITLE Alternatives to Abortion Program Services																					
CONTRACT NUMBER CS170042007	CONTRACT PERIOD February 1, 2017 through June 30, 2017																					
REQUISITION/REQUEST NUMBER NR 300300700001	SAM II VENDOR NUMBER/MissouriBUYS SYSTEM ID 43065265000/MB00091282																					
CONTRACTOR NAME AND ADDRESS LUTHERAN FAMILY AND CHILDRENS SERVICES OF MISSOURI 9666 OLIVE BOULEVARD SUITE 400 SAINT LOUIS MO 63132-3025	STATE AGENCY'S NAME AND ADDRESS Office of Administration Commissioner's Office State Capitol Building, Room 125 Jefferson City MO 65101																					
ACCEPTED BY THE STATE OF MISSOURI AS FOLLOWS: The proposal submitted by Lutheran Family and Children's Services of Missouri in response to Solicitation Opportunity OPP No. RFPS30034901700042 is accepted in its entirety. The maximum annual total prices available for fiscal year 2017 and prorated total prices for the above-referenced contract period are as follows: <table border="1" data-bbox="289 1367 1422 1598"><thead><tr><th>Geographic Region</th><th>Maximum Annual Total Price</th><th>Prorated Total Price for the Period February 1, 2017 through June 30, 2017</th></tr></thead><tbody><tr><td>1</td><td>\$69,783.78</td><td>\$29,076.58</td></tr><tr><td>3</td><td>\$173,996.15</td><td>\$72,498.40</td></tr><tr><td>4</td><td>\$112,597.68</td><td>\$46,915.70</td></tr><tr><td>6</td><td>\$272,711.69</td><td>\$113,629.87</td></tr><tr><td>7</td><td>\$167,087.00</td><td>\$69,619.58</td></tr><tr><td>9</td><td>\$78,716.24</td><td>\$32,798.43</td></tr></tbody></table>		Geographic Region	Maximum Annual Total Price	Prorated Total Price for the Period February 1, 2017 through June 30, 2017	1	\$69,783.78	\$29,076.58	3	\$173,996.15	\$72,498.40	4	\$112,597.68	\$46,915.70	6	\$272,711.69	\$113,629.87	7	\$167,087.00	\$69,619.58	9	\$78,716.24	\$32,798.43
Geographic Region	Maximum Annual Total Price	Prorated Total Price for the Period February 1, 2017 through June 30, 2017																				
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9	\$78,716.24	\$32,798.43																				
BUYER Julie Kleffner	BUYER CONTACT INFORMATION Email: Julie.Kleffner@oa.mo.gov Phone: (573) 751-7656 Fax: (573) 526-9816																					
SIGNATURE OF BUYER 	DATE 1-25-17																					
DIRECTOR OF PURCHASING  Karen S. Boeger																						



STATE OF MISSOURI
OFFICE OF ADMINISTRATION
DIVISION OF PURCHASING (PURCHASING)
REQUEST FOR BEST AND FINAL OFFER (BAFO)
FOR REQUEST FOR PROPOSAL (RFP)

BAFO REQUEST NO.: 002
SOLICITATION/OPPORTUNITY (OPP) NO.: RFPS30034901700042
TITLE: Alternatives to Abortion Program Services
ISSUE DATE: 10/18/16

REQ NO.: NR 300 300700001
BUYER: Julie Kleffner
PHONE NO.: (573) 751-7656
E-MAIL: Julie.Kleffner@oa.mo.gov

BAFO RESPONSE SHOULD BE RETURNED BY: 10/25/16 AT 5:00 PM CENTRAL TIME

MAILING INSTRUCTIONS: Print or type RFP Number and Return Due Date on the lower left hand corner of the envelope or package. Sealed BAFOs should be in Division of Purchasing office (301 W High Street, Room 630) by the return date and time.

RETURN BAFO RESPONSE TO: (U.S. Mail) PURCHASING PO BOX 809 JEFFERSON CITY MO 65102-0809 or (Courier Service) PURCHASING 301 WEST HIGH STREET, RM 630 JEFFERSON CITY MO 65101-1517

CONTRACT PERIOD: Effective Date of Contract Through June 30, 2017

DELIVER SUPPLIES/SERVICES FOB (Free On Board) DESTINATION TO THE FOLLOWING ADDRESS:

Office of Administration
Commissioner's Office of Administration
State Capitol Building, Room 125
Jefferson City MO 65101

The vendor hereby declares understanding, agreement and certification of compliance to provide the items and/or services, at the prices quoted, in accordance with all terms and conditions, requirements, and specifications of the original RFP as modified by any previously issued RFP addendums and by this and any previously issued BAFO requests. The vendor agrees that the language of the original RFP as modified by any previously issued RFP addendums and by this and any previously issued BAFO requests shall govern in the event of a conflict with his/her proposal. The vendor further agrees that upon receipt of an authorized purchase order from the Division of Purchasing or when a Notice of Award is signed and issued by an authorized official of the State of Missouri, a binding contract shall exist between the vendor and the State of Missouri.

SIGNATURE REQUIRED

VENDOR NAME Lutheran Family and Children's Services of Missouri		MissouriBUYS SYSTEM ID (SEE VENDOR PROFILE - MAIN INFORMATION SCREEN) 91282	
MAILING ADDRESS 9666 Olive Boulevard, Suite 400			
CITY, STATE, ZIP CODE Saint Louis, MO 63132-3025			
CONTACT PERSON Christine Corcoran		EMAIL ADDRESS ChristineC@lfcs.org	
PHONE NUMBER 314-787-5100 ext. 2731		FAX NUMBER 314-785-7307	
VENDOR TAX FILING TYPE WITH IRS (CHECK ONE) <input type="checkbox"/> Corporation <input type="checkbox"/> Individual <input type="checkbox"/> State/Local Government <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietor <input checked="" type="checkbox"/> IRS Tax-Exempt			
AUTHORIZED SIGNATURE 		DATE October 20, 2016	
PRINTED NAME Paulette Foerster		TITLE Interim Executive Director	



STATE OF MISSOURI
OFFICE OF ADMINISTRATION
DIVISION OF PURCHASING (PURCHASING)
REQUEST FOR BEST AND FINAL OFFER (BAFO)
FOR REQUEST FOR PROPOSAL (RFP)

BAFO REQUEST NO.: 001
SOLICITATION/OPPORTUNITY (OPP) NO.: RFPS30034901700042
TITLE: Alternatives to Abortion Program Services
ISSUE DATE: 09/27/16

REQ NO.: NR 300 300700001
BUYER: Julie Kleffner
PHONE NO.: (573) 751-7656
E-MAIL: Julie.Kleffner@oa.mo.gov

BAFO RESPONSE SHOULD BE RETURNED BY: October 4, 2016 AT 5:00 PM CENTRAL TIME

MAILING INSTRUCTIONS: Print or type RFP Number and Return Due Date on the lower left hand corner of the envelope or package. Sealed BAFOs should be in Division of Purchasing office (301 W High Street, Room 630) by the return date and time.

RETURN BAFO RESPONSE TO: (U.S. Mail) PURCHASING PO BOX 809 JEFFERSON CITY MO 65102-0809 or (Courier Service) PURCHASING 301 WEST HIGH STREET, RM 630 JEFFERSON CITY MO 65101-1517

CONTRACT PERIOD: Effective Date of Contract Through June 30, 2017

DELIVER SUPPLIES/SERVICES FOB (Free On Board) DESTINATION TO THE FOLLOWING ADDRESS:

Office of Administration
Commissioner's Office of Administration
State Capitol Building, Room 125
Jefferson City MO 65101

The vendor hereby declares understanding, agreement and certification of compliance to provide the items and/or services, at the prices quoted, in accordance with all terms and conditions, requirements, and specifications of the original RFP as modified by any previously issued RFP addendums and by this and any previously issued BAFO requests. The vendor agrees that the language of the original RFP as modified by any previously issued RFP addendums and by this and any previously issued BAFO requests shall govern in the event of a conflict with his/her proposal. The vendor further agrees that upon receipt of an authorized purchase order from the Division of Purchasing or when a Notice of Award is signed and issued by an authorized official of the State of Missouri, a binding contract shall exist between the vendor and the State of Missouri.

SIGNATURE REQUIRED

VENDOR NAME		MissouriBUYS SYSTEM ID (SEE VENDOR PROFILE - MAIN INFORMATION SCREEN)	
Lutheran Family and Children's Services of Missouri		91282	
MAILING ADDRESS			
9666 Olive Boulevard, Suite 400			
CITY, STATE, ZIP CODE			
Saint Louis, MO 63132-3025			
CONTACT PERSON		EMAIL ADDRESS	
Christine Corcoran		ChristineC@lfcs.org	
PHONE NUMBER		FAX NUMBER	
314-787-5100 ext.2731		314-785-7307	
VENDOR TAX FILING TYPE WITH IRS (CHECK ONE)			
<input type="checkbox"/> Corporation <input type="checkbox"/> Individual <input type="checkbox"/> State/Local Government <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietor <input checked="" type="checkbox"/> IRS Tax-Exempt			
AUTHORIZED SIGNATURE		DATE	
		October 20, 2016	
PRINTED NAME		TITLE	
Paulette Foerster		Interim Executive Director	

Lutheran Family and Children's Services of Missouri
Response to BAFO's 1 and 2 for RFPS30034901700042

Included are the following materials:

In response to BAFO 1:

- Personnel qualifications explanation and documentation
- Updated Pricing Page

In response to BAFO 2:

- Updates to Exhibit F (Method of Performance)

PRICING PAGE, continued

Pricing Table Revised by Addendum #1

Line Item	Geographic Region	Original Contract Period Maximum Annual Total Price (based upon a 12-month period)	Minimum Annual Total Price Required to Provide Services (based upon a 12-month period)	Non-Residential Services, Price Per Client, Per Month	Residential Care Services, Price Per Client, Per Month
1	1	\$ <u>69,783.78</u>	\$ <u>46,521</u>	\$ <u>164.72</u>	\$ <u>50</u>
2	2	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
3	3	\$ <u>173,996.15</u>	\$ <u>135,136</u>	\$ <u>166.09</u>	\$ <u>50</u>
4	4	\$ <u>112,597.38</u>	\$ <u>84,000</u>	\$ <u>282.82</u>	\$ <u>50</u>
5	5	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
6	6	\$ <u>272,711.69</u>	\$ <u>211,000</u>	\$ <u>235.52</u>	\$ <u>2,000</u>
7	7	\$ <u>167,087.00</u>	\$ <u>148,000</u>	\$ <u>355.74</u>	\$ <u>50</u>
8	8	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
9	9	\$ <u>78,716.24</u>	\$ <u>58,500</u>	\$ <u>118.36</u>	\$ <u>50</u>

October 18, 2016

Attention: Julie Kleffner

Division of Purchasing

301 West High Street, Truman building, Room 630

Jefferson City, MO 65101-1517

Per Identified Deficiencies 1.1

Credentialed Case Manager, Marianne Brachman is now licensed in the state of Missouri and meets the licensure requirement as defined by section 337.600 RSMo.

The licensure has an expiration date of September 30, 2018.



Jeremiah W. (Jay) Nixon
Governor
State of Missouri

Kathleen (Katie) Steele Danner, Division Director
DIVISION OF PROFESSIONAL REGISTRATION

Department of Insurance
Financial Institutions
and Professional Registration
John M. Huff, Director

STATE COMMITTEE FOR SOCIAL WORKERS
3605 Missouri Boulevard
P.O. Box 1335
Jefferson City, MO 65102-1335
573-751-0885
573-526-3489 FAX
800-735-2966 TTY Relay Missouri
800-735-2466 Voice Relay Missouri
lcsww@pr.mo.gov
<http://pr.mo.gov/socialworkers.asp>

Tom Reichard
Executive Director

October 13, 2016

Dear Ms. Brachman:

CONGRATULATIONS!

The State Committee for Social Workers has reviewed your application for licensure. You have been approved for licensure in Missouri. Please note the expiration date on your license. You are responsible for renewing your license whether or not you have received a renewal form. If you have not received a form two months prior to the expiration of your license, you should contact the committee office.

You will be receiving a large wall hanging certificate suitable for framing, some time in the near future. This wall hanging is NOT a license to practice but rather a certificate stating the date you were licensed and your license number. This is provided at no additional cost to the licensee.

You are required to obtain thirty (30) clock hours of continuing education, pertaining to clinical social work, each renewal cycle. The certificates of completion must be kept by the licensee. The committee does random audits and will require proof of continuing education completion if you are chosen for audit. Please be familiar with the rules regarding continuing education, 20 CSR 2263-2.082. You may view the rules on our website at www.pr.mo.gov/socialworkers.asp. Please note that your first renewal cycle continuing education will be pro-rated (if you were not issued a full two year license). Please refer to the rules, available on the Committee website, for the total number of hours required for the first renewal cycle.

Should you have any questions you may contact this office at the above number.

Sincerely,


Kim Shodgrass
Processing Technician II

State of Missouri

Division of Professional Registration
Licensed Master Social Worker

VALID THROUGH SEPTEMBER 30, 2018
ORIGINAL CERTIFICATE/LICENSE NO: 2016036997
MARIANNE L. BRACHMAN
[REDACTED]
USA

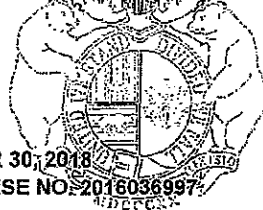
MARIANNE L. BRACHMAN

[REDACTED]

USA

State of Missouri

Department of Insurance, Financial Institutions and Professional Registration
Division of Professional Registration
State Committee for Social Workers
Licensed Master Social Worker



VALID THROUGH SEPTEMBER 30, 2018
ORIGINAL CERTIFICATE/LICENSE NO: 2016036997

MARIANNE L. BRACHMAN

[REDACTED]

USA


EXECUTIVE DIRECTOR

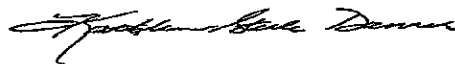

DIVISION DIRECTOR

EXHIBIT E

EXPERTISE OF KEY PERSONNEL

(Copy and complete this table for each key person proposed. Identify the geographic region(s) the proposed key personnel will provide service in.)

Title of Position: Credentialed Case Manager	
Geographic Region(s): Buchanan County. _____	
Name of Person:	Marianne L. Brachman
Educational Degree (s): include college or university, major, and dates	MSW-UND-1995; MSM-Cardinal Stritch-1987; Grad. Certif. UW-1989
License(s)/Certification(s), #(s), expiration date(s), if applicable:	Licensed Master Social Worker-MO #2016036997 Expiration September 30, 2018
Specialized Training Completed.	Child Protection-1993/94;Gambling Addiction-2008/09.
# of years' experience in area of service proposed to provide:	Employed since 2006 at Catholic Charities Kansas City-St. Joseph (CCKC)
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	Employee of Sub-contractor for 9 years at CCKC-St. Joseph
Describe this person's responsibilities over the past 12 months.	Case Manager, intakes,assessments/outreach,budgeting,education/support
Previous employer(s), positions, and dates	Village Family Services- Fargo 1997-2000-Clinical Social Worker Boothel Mental Health Counseling 2001-2002 FDS.
Identify specific information about experience in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
✓ Early childhood development	2006 at CCKC as Family Dev. Specialist
✓ Family/marital counseling	1997 -2000 at Village Family Service Fargo,ND
✓ Social work	1997 -2000 at Village Family Service Fargo,ND
✓ Case management	2006
✓ Program administration	0

EXHIBIT F

METHOD OF PERFORMANCE

The vendor should present a written plan for performing the requirements specified in this Request for Proposal. In presenting such information, the vendor should specifically address each of the following issues:

4. **For each geographic region proposed, identify the site where the Initial Client Intake Assessment will be conducted. Describe how client eligibility will be determined.**

GEOGRAPHIC REGION 1 <i>(Identify the geographic region. If proposing multiple geographic regions, copy and complete this table for each geographic region proposed.)</i>	
Identify the site where the Initial Client Intake Assessment will be conducted:	Initial client intake and assessment will occur at the Catholic Charities office in St. Joseph, satellite office in Marysville, or at Mosaic Life Care, except under dire circumstances where the client is not able to get to the office. For example, if a client would be on bedrest or lives outside of the area where there is public transportation, then the intake and assessment could occur offsite.
<p>Describe how client eligibility will be determined.</p> <p>When a woman is pregnant and contacts Catholic Charities for assistance, she is prescreened and asked the following questions: 1) Are you pregnant? 2) Do you live in Missouri? 3) What is your monthly income? and 4) Do you have a case manager elsewhere? or What other social service agencies are you working with? Then staff will determine if a client is receiving Alternatives to Abortion services elsewhere and have the client provide written confirmation they are not enrolled in the program through another provider. In the event that the client is uncertain, the case manager will contact the other agency. The client will be asked to sign a release of information form before contact is made with the other agency.</p> <p>If the client meets all eligibility, she is either immediately assigned a case manager or put on the wait list for when a case manager has an opening. The case manager will schedule an appointment with her for the intake and assessment. When an appointment is made, the client will be informed to bring proper documentation to prove their pregnancy, residency, and income. The following forms of documentation are can be accepted:</p> <ul style="list-style-type: none">-Proof of pregnancy from a medical provider or another social service agency-MO government issued ID-Copy of a lease-Homeless letter from a Missouri agency-Utility bill-Pay checks stubs-Letter, email or fax from her employer-Social Security benefits statement-SNAP benefits statements or award letter <p>At the intake and assessment appointment, the documentation is reviewed and copy is placed in the client's file. If she fails to bring all the necessary documentation, the case manager aids her in selecting what forms of documentation may be easiest for her to obtain then schedules a follow-up appointment to collect the documentation. If a woman fails to provide documentation of pregnancy, residency and income that meet the eligibility requirements, she would not be enrolled in the program.</p>	

GEOGRAPHIC REGION 3

Identify the site where the Initial Client Intake Assessment will be conducted:	Initial client intake and assessment will occur at the Catholic Charities office in Kansas City, except under dire circumstances where the client is not able to get to the office. For example, if a client would be on bedrest or lives outside of the area where there is public transportation, then the intake and assessment could occur offsite.
---	---

Describe how client eligibility will be determined.

When a woman is pregnant and contacts Catholic Charities for assistance, she is prescreened and asked the following questions: 1) Are you pregnant? 2) Do you live in Missouri? 3) What is your monthly income? and 4) Do you have a case manager elsewhere? or What other social service agencies are you working with? Then staff will determine if a client is receiving Alternatives to Abortion services elsewhere and have the client provide written confirmation they are not enrolled in the program through another provider. In the event that the client is uncertain, the case manager will contact the other agency. The client will be asked to sign a release of information form before contact is made with the other agency.

If the client meets all eligibility, she is either immediately assigned a case manager or put on the wait list for when a case manager has an opening. The case manager will schedule an appointment with her for the intake and assessment. When an appointment is made, the client will be informed to bring proper documentation to prove their pregnancy, residency, and income. The following forms of documentation can be accepted:

- Proof of pregnancy from a medical provider or another social service agency
- MO government issued ID
- Copy of a lease
- Homeless letter from a Missouri agency
- Utility bill
- Pay checks stubs
- Letter, email or fax from her employer
- Social Security benefits statement
- SNAP benefits statements or award letter

At the intake and assessment appointment, the documentation is reviewed and copy is placed in the client's file. If she fails to bring all the necessary documentation, the case manager aids her in selecting what forms of documentation may be easiest for her to obtain then schedules a follow-up appointment to collect the documentation. If a woman fails to provide documentation of pregnancy, residency and income that meet the eligibility requirements, she would not be enrolled in the program.

GEOGRAPHIC REGION 4

(Identify the geographic region. If proposing multiple geographic regions, copy and complete this table for each geographic region proposed.)

Identify the site where the Initial Client Intake Assessment will be conducted:	The Initial Client Intake Assessment will be conducted at the LFCS office in Columbia, Missouri or in the client's home. Clients are able to choose which option is best for them, typically choosing to meet in their homes. Occasionally a client will request to meet
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	at a community location, such as a library. Case Managers will meet with clients in community locations when confidentiality can be maintained.
<p>Describe how client eligibility will be determined.</p> <p>When a woman is pregnant and contacts Lutheran Family and Children's Services of Missouri for assistance, she is prescreened and asked the following questions: 1) Are you pregnant? 2) Do you live in Missouri? 3) What is your monthly income? and 4) Do you have a case manager elsewhere? or What other social service agencies are you working with? Then staff will determine if a client is receiving Alternatives to Abortion services elsewhere and have the client provide written confirmation they are not enrolled in the program through another provider. In the event that the client is uncertain, the case manager will contact the other agency. The client will be asked to sign a release of information form before contact is made with the other agency.</p> <p>If the client meets all eligibility, she is either immediately assigned a case manager or put on the wait list for when a case manager has an opening. The case manager will schedule an appointment with her for the intake and assessment. When an appointment is made, the client will be informed to bring proper documentation to prove their pregnancy, residency, and income. The following forms of documentation can be accepted:</p> <ul style="list-style-type: none"> -Proof of pregnancy from a medical provider or another social service agency -MO government issued ID -Copy of a lease -Homeless letter from a Missouri agency -Utility bill -Pay checks stubs -Letter, email or fax from her employer -Social Security benefits statement -SNAP benefits statements or award letter <p>At the intake and assessment appointment, the documentation is reviewed and copy is placed in the client's file. If she fails to bring all the necessary documentation, the case manager aids her in selecting what forms of documentation may be easiest for her to obtain then schedules a follow-up appointment to collect the documentation. If a woman fails to provide documentation of pregnancy, residency and income that meet the eligibility requirements, she would not be enrolled in the program.</p>	

<p align="center">GEOGRAPHIC REGION 6</p> <p align="center"><i>(Identify the geographic region. If proposing multiple geographic regions, copy and complete this table for each geographic region proposed.)</i></p>	
Identify the site where the Initial Client Intake Assessment will be conducted:	The Initial Client Intake Assessment will be conducted at the office of the agency the client chooses, which may be LFCS, MBCH, GSCFS or in the client's home. Clients are able to choose which option is best for them, typically choosing to meet in their homes. Occasionally a client will request to meet at a community location, such as a library. Case Managers will meet with clients in community locations when confidentiality can be maintained.
<p>Describe how client eligibility will be determined.</p> <p>When a woman is pregnant and contacts one of the three agencies covering region 6 for assistance, she is prescreened and asked the following questions: 1) Are you pregnant? 2) Do you live in Missouri? 3) What</p>	

is your monthly income? and 4) Do you have a case manager elsewhere? or What other social service agencies are you working with? Then staff will determine if a client is receiving Alternatives to Abortion services elsewhere and have the client provide written confirmation they are not enrolled in the program through another provider. In the event that the client is uncertain, the case manager will contact the other agency. The client will be asked to sign a release of information form before contact is made with the other agency.

If the client meets all eligibility, she is either immediately assigned a case manager or put on the wait list for when a case manager has an opening. The case manager will schedule an appointment with her for the intake and assessment. When an appointment is made, the client will be informed to bring proper documentation to prove their pregnancy, residency, and income. The following forms of documentation can be accepted:

- Proof of pregnancy from a medical provider or another social service agency
- MO government issued ID
- Copy of a lease
- Homeless letter from a Missouri agency
- Utility bill
- Pay checks stubs
- Letter, email or fax from her employer
- Social Security benefits statement
- SNAP benefits statements or award letter

At the intake and assessment appointment, the documentation is reviewed and copy is placed in the client's file. If she fails to bring all the necessary documentation, the case manager aids her in selecting what forms of documentation may be easiest for her to obtain then schedules a follow-up appointment to collect the documentation. If a woman fails to provide documentation of pregnancy, residency and income that meet the eligibility requirements, she would not be enrolled in the program.

GEOGRAPHIC REGION 7

(Identify the geographic region. If proposing multiple geographic regions, copy and complete this table for each geographic region proposed.)

Identify the site where the Initial Client Intake Assessment will be conducted:	The Initial Client Intake Assessment will be conducted at the LFCS office in Springfield, Missouri or in the client's home. Clients are able to choose which option is best for them, typically choosing to meet in their homes. Occasionally a client will request to meet at a community location, such as a library. Case Managers will meet with clients in community locations when confidentiality can be maintained.
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Describe how client eligibility will be determined.

When a woman is pregnant and contacts Lutheran Family and Children's Services of Missouri for assistance, she is prescreened and asked the following questions: 1) Are you pregnant? 2) Do you live in Missouri? 3) What is your monthly income? and 4) Do you have a case manager elsewhere? or What other social service agencies are you working with? Then staff will determine if a client is receiving Alternatives to Abortion services elsewhere and have the client provide written confirmation they are not enrolled in the program through another provider. In the event that the client is uncertain, the case manager will contact the other agency. The client will be asked to sign a release of information form before contact is made with the other agency.

If the client meets all eligibility, she is either immediately assigned a case manager or put on the wait list for when a case manager has an opening. The case manager will schedule an appointment with her for the

intake and assessment. When an appointment is made, the client will be informed to bring proper documentation to prove their pregnancy, residency, and income. The following forms of documentation can be accepted:

- Proof of pregnancy from a medical provider or another social service agency
- MO government issued ID
- Copy of a lease
- Homeless letter from a Missouri agency
- Utility bill
- Pay checks stubs
- Letter, email or fax from her employer
- Social Security benefits statement
- SNAP benefits statements or award letter

At the intake and assessment appointment, the documentation is reviewed and copy is placed in the client's file. If she fails to bring all the necessary documentation, the case manager aids her in selecting what forms of documentation may be easiest for her to obtain then schedules a follow-up appointment to collect the documentation. If a woman fails to provide documentation of pregnancy, residency and income that meet the eligibility requirements, she would not be enrolled in the program.

GEOGRAPHIC REGION 2

(Identify the geographic region. If proposing multiple geographic regions, copy and complete this table for each geographic region proposed.)

Identify the site where the Initial Client Intake Assessment will be conducted:	The Initial Client Intake Assessment will be conducted at the LFCS office in Cape Girardeau, Missouri or in the client's home. Clients are able to choose which option is best for them, typically choosing to meet in their homes. Occasionally a client will request to meet at a community location, such as a library. Case Managers will meet with clients in community locations when confidentiality can be maintained.
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Describe how client eligibility will be determined.

When a woman is pregnant and contacts Lutheran Family and Children's Services of Missouri or MBCH for assistance, she is prescreened and asked the following questions: 1) Are you pregnant? 2) Do you live in Missouri? 3) What is your monthly income? and 4) Do you have a case manager elsewhere? or What other social service agencies are you working with? Then staff will determine if a client is receiving Alternatives to Abortion services elsewhere and have the client provide written confirmation they are not enrolled in the program through another provider. In the event that the client is uncertain, the case manager will contact the other agency. The client will be asked to sign a release of information form before contact is made with the other agency.

If the client meets all eligibility, she is either immediately assigned a case manager or put on the wait list for when a case manager has an opening. The case manager will schedule an appointment with her for the intake and assessment. When an appointment is made, the client will be informed to bring proper documentation to prove their pregnancy, residency, and income. The following forms of documentation can be accepted:

- Proof of pregnancy from a medical provider or another social service agency
- MO government issued ID
- Copy of a lease
- Homeless letter from a Missouri agency

-Utility bill
-Pay checks stubs
-Letter, email or fax from her employer
-Social Security benefits statement
-SNAP benefits statements or award letter

At the intake and assessment appointment, the documentation is reviewed and copy is placed in the client's file. If she fails to bring all the necessary documentation, the case manager aids her in selecting what forms of documentation may be easiest for her to obtain then schedules a follow-up appointment to collect the documentation. If a woman fails to provide documentation of pregnancy, residency and income that meet the eligibility requirements, she would not be enrolled in the program.

7. For each geographic region proposed, describe each of the services specified in section 2.3.2 of the RFP. Explain the service delivery system including any referral network and referral plan. Describe the cultural competency of providers.

Other services (as referenced in RFP point #2.3.2.1) are provided according to the needs identified in the IRNA and documented in the IPCP. PMN Case Managers assess all sources to meet those needs within the community and access ATA contract funds only when no other source can be identified. The PMN Case Manager makes the referral or assists the client in arranging for the basic need to be met. The following is a list of those services and common referrals. Referrals are listed by region.

Prenatal Care

Prenatal care is a priority for every woman in this program. The client, together with the Case Manager, works to identify her needs and resources (e.g. private insurance, Medicaid, private pay, etc.). The Case Manager makes referrals to local prenatal care providers, including doctors, health centers, clinics, and hospitals, for prenatal care only as well as prenatal care and delivery.

Geographic Region 1: Mosaic Life Care Women's Health

Geographic Region 3: Swope Health, Truman and St. Luke's Hospitals

Geographic Region 4: Women's and Children's Hospital, Family Health Center

Geographic Region 6: Mercy JFK Clinic, People's Health Center, St. Louis County Health Department

Geographic Region 7: Jordan Valley, Cox and Mercy Hospitals, Family Medical Care Clinic

Geographic Region 9: Southeast Health, Missouri Delta Medical Center

Medical Care

Health maintenance, prevention, and treatment are provided by a licensed medical provider. Medical care may include maintenance of health, prevention or treatment of illness, and treatment of injury or pregnancy complications for clients, as such services relate to the prevention of abortion.

Geographic Region 1: Mosaic Life Care Women's Health, Northwest Health Services

Geographic Region 3: Swope Health, Truman and Sam Rogers Hospitals

Geographic Region 4: Family Health Care Center, University of Missouri Clinic

Geographic Region 6: John C. Murphy Clinic, People's Health Center, Affinia Health Center

Geographic Region 7: Jordan Valley, Family Medical Care Center, Cox and Mercy Hospitals

Geographic Region 9: Twin Rivers Medical Center, South East Health, St. Francis Medical Center

Mental Health Care

Counseling or treatment to assist the client with management of mental illness, stress, postpartum depression, or other issues affecting her mental/emotional well-being is referred for services when indicated. These services are provided by a licensed or certified professional.

Geographic Region 1: Serenity Counseling Center, Family Guidance, Samaritan Counseling Center

Geographic Region 3: Truman Hospital, Tri-County Mental Health, Center for Behavior Medicine

Geographic Region 4: Maternal Mental Health Program, Family Counseling Center, Lisa Brown, LCSW

Geographic Region 6: Behavioral Health Response, Center Pointe, DePaul Health Center

Geographic Region 7: Burrell, Ozark Counseling Center, Center City Counseling Clinic

Geographic Region 9: Community Counseling Center, Bootheel Counseling

Newborn or Infant Medical Care

Medical care and interventions by a licensed medical provider may be provided to the baby throughout the first year of his or her life.

Geographic Region 1: Mosaic Life Care Hospital/Urgent Care, Social Welfare Board Health Clinic, Lakeside Pediatrics

Geographic Region 3: Swope Health, Truman and St. Luke's Hospitals

Geographic Region 4: Women & Children's Hospital, Family Health Center

Geographic Region 6: John C. Murphy Clinic, People's Health Center, Affinia Health Center

Geographic Region 7: Family Medical Care Clinic, Cox and Mercy Hospitals

Geographic Region 9: Southeast Pediatrics, Cape County Health Department, Cape Physician Associates

Adoption Assistance

PMN agencies provide education, support, and case management services regarding the emotional and legal aspects of adoption. The client may also be referred to an attorney when indicated. Each of the four agencies that comprise the Pregnancy Maintenance Network (PMN) provide adoption assistance directly.

Child Care

The client is assisted with child care arrangements when needed to participate in contract activities or services. A client is referred to the Department of Social Services for child care assistance and then may use either a day care facility or in-home care. Child care providers must meet minimum Children's Division standards, which require a Family Care Safety Registry.

Geographic Region 1: DSS Family Support Division, InterServ Early Care and Education, YWCA, MO/Respite Child Care-Noyes Home

Geographic Region 3: DSS Family Support Division, Head Start, Family Conservancy, Operation Breakthrough

Geographic Region 4: DSS Family Support Division, Child Care Aware

Geographic Region 6: DSS Family Support Division, Child Care Aware, Crisis Nursery

Geographic Region 7: DSS Family Support Division, Child Care Resource and Referral, Child Development Center

Geographic Region 9: DSS Family Support Division, Head Start, Delta Area Economic Opportunity Corporation.

Clothing

Clothing relating to pregnancy, newborn care, and parenting may be supplied.

Geographic Region 1: Grace House, Second Season Thrift Shop, InterServ Cherokee Street Store

Geographic Region 3: Catholic Charities of KC-St. Joseph, Goodwill

Geographic Region 4: The Wardrobe, Salvation Army, Goodwill

Geographic Region 6: Helping Hand Me Downs, Goodwill, Salvation Army

Geographic Region 7: Crosslines, Salvation Army, Grand Oaks Mission, School Clothing Bank

Geographic Region 9: Salvation Army, Goodwill, Love, Inc.

Domestic Abuse Protection

Each client is assessed for violence in her relationships. If a client is threatened or in danger, the Case Manager will make timely and appropriate arrangements to assist the client and her children in assuring their physical and emotional safety is met. Referral to a domestic violence agency for shelter and/or education on protection is made as appropriate.

Geographic Region 1: YWCA Shelter, Legal Aid of Western Missouri

Geographic Region 3: Rose Brooks, Synergy, Hope House

Geographic Region 4: True North, Rainbow House, Jefferson City Rape and Abuse Crisis Services

Geographic Region 6: Raven, ALIVE, Women's Safe House

Geographic Region 7: Harmony House, COPE House

Geographic Region 9: Haven House, Safe House for Women

Drug and Alcohol Testing and Treatment

Each client is assessed for substance use. Drug/alcohol testing and treatment is provided as needed. When a problem is identified through report or through testing, the client is referred to an individual, group, or family program that is appropriately licensed or certified.

Geographic Region 1: Serenity Counseling Center, Addiction Awareness

Geographic Region 3: Truman Hospital, Tri-County

Geographic Region 4: McCambridge Center, Phoenix Program, Valley Hope

Geographic Region 6: Black Alcohol/Drug Service Information Center (BASIC), Crider, Bridgeway, Center Pointe, Harris House

Geographic Region 7: Preferred Family Health, Burrell, Cox Center for Addictions

Geographic Region 9: Family Counseling Center, Bootheel Counseling

Educational Services

Referrals are made to local public school districts and Hi-SET programs for women who have not completed high school. As appropriate, resources for college, vocational and technical training, books, etc. may be provided.

Geographic Region 1: Webster Learning Center for Hi-SET, Missouri Career Center

Geographic Region 3: Independence Adult Education, Kansas City Adult Education, Blue Springs Adult Education

Geographic Region 4: Career Center, Columbia Area Vocational Tech School, Douglass High School Hi-SET program

Geographic Region 6: Women In Charge, Doors to Success, Job Corp

Geographic Region 7: Missouri Job Center, Ozark Technical Community College Adult Education, Missouri State University, Trade Schools

Geographic Region 9: Southeast Missouri State University Hi-SET, Three Rivers Community College, Mineral Area College

Food

Food products or nutritional products relating to pregnancy, newborn care, and parenting may be supplied. Clients are referred to SNAP and WIC programs and provided information about local food pantries when additional resources are needed.

Geographic Region 1: Second Harvest Food Bank, Open Door Food Kitchen, WIC

Geographic Region 3: Catholic Charities Kansas City-St. Joseph, Guadalupe Center, No Boundaries Food Pantry

Geographic Region 4: Salvation Army, Love, Inc., Food Pantry

Geographic Region 6: Jewish FCS Food Pantry, Loaves and Fishes, Hunger Hotline

Geographic Region 7: Crosslines, Schweitzer United Methodist Church food pantry, Grant Oaks Mission

Geographic Region 9: Virgies Place, Inc., Missouri Bootheel Regional Consortium, Southeast Missouri Food Bank

Housing

When needed, the client is assisted in finding appropriate safe housing. Depending on the age and needs of the client and the availability of resources, the following options will be considered: motel/hotel (for emergency situations), group shelter (including domestic violence shelters), transitional living, independent living, placement with a family, foster care, and residential treatment, or assistance with rent, house payments or security deposits. In the event that residential services are needed, the client will be provided a referral to a residential facility in the region where she resides. In the event there is not a residential facility in the region or a wait list, the client will be provided with a referral to Missouri Baptist Children's Home in Region 6, a subcontractor through this contract. Referrals for the other types of housing listed are included below.

Geographic Region 1: St. Joseph Housing Authority, HOME Unit, Hillcrest Transitional Housing

Geographic Region 3: United Services, Section 8, Salvation Army

Geographic Region 4: Housing Authority, Columbia Square, Lakewood, Sal. Army Harbor House

Geographic Region 6: Housing Resource Center, Community Action Agency of STLC, Housing Authority

Geographic Region 7: Affordable Housing Center, One Door, Housing Authority, The Kitchen

Geographic Region 9: Housing Authority, MO Bootheel Regional Consortium, Amen Center

Utilities

As established social services agencies, the subcontractors of this program have a working knowledge of community energy resources, which are provided to clients. Clients are provided with information on the LIHEAP application and referred to the local agency responsible for administering the program.

Geographic Region 1: Catholic Charities Kansas City-St. Joseph, Inter Serv EA program, Community Action Partnership, House of Bread

Geographic Region 3: Catholic Charities Kansas City-St. Joseph, Salvation Army

Geographic Region 4: Central Missouri Community Action, Love, Inc., St. Vincent-DePaul

Geographic Region 6: Community Action Agency of STLC, Urban League, St. Vincent-DePaul

Geographic Region 7: Ozarks Area Community Action Corp., One Door, Salvation Army

Geographic Region 9: MO Bootheel Regional Consortium, Delta Area Econ. Opp Consortium, Ministerial Alliance

Job Training and Placement

Referrals to established programs or other assistance that facilitate and/or enhance the employability of the client and/or father of the baby are utilized.

Geographic Region 1: Missouri Career Center, Hillyard Tech Center, Good Works, Vocational Rehab, Missouri Western University

Geographic Region 3: Catholic Charities Kansas City-St. Joseph, Metropolitan Lutheran Services, Job Corps Center

Geographic Region 4: Job Corp, Vocational Rehab

Geographic Region 6: Better Family Life, Missouri Career Center, Job Corp

Geographic Region 7: Missouri Job Center, Schweitzer United Methodist Church-Jobs for Life, Temporary Employment Agencies

Geographic Region 9: Manpower, Workforce, United Way

Supplies

Supplies relating to pregnancy, newborn care, and parenting may be provided and may include car seats, Pack 'N Play, etc.. All the women in the program will be assessed for ability to provide a safe sleep environment for her infant as set forth by the 2011 American Academy of Pediatric Guidelines.

Geographic Region 1: St. Joseph Health and Safety Council, St. Joseph Youth Alliance

Geographic Region 3: Birthright, Safety Council

Geographic Region 4: Love, Inc., Voluntary Action Center, Fairview Church

Geographic Region 6: Birthright, Mary Queen of Angels, SIDS Resources

Geographic Region 7: Safe Kids, Newborns in Need, Crosslines

Geographic Region 9: Birthright, Virgies Place, Inc., Salvation Army

Transportation

In order to assist clients to access the other services provided under this program, the clients may be given assistance for transportation, including bus fare, taxicab fare or private transportation (i.e. gift cards for gasoline).

Geographic Region 1: St. Joseph Transit, All-American Taxi, Logisticare, Oats Bus

Geographic Region 3: Medicaid, Kansas City Transit Authority

Geographic Region 4: Voluntary Action Center, MidMo Rides, Central Missouri Community Action

Geographic Region 6: Call-a-ride, Metrolink public transportation

Geographic Region 7: CU Transit Services, Medicaid Transport, Missouri Jobs Center

Geographic Region 9: SEMO Transit Service, Cape Transit Service, Love, Inc., Medicaid Transport

Ultrasound Services

A client receives ultrasound tests as medically indicated, utilizing her own, or program referred resources.

Geographic Region 1: Mosaic Life Care Women's Health

Geographic Region 3: Swope Health and Truman Hospitals, Rachel's House

Geographic Region 4: My Life Clinic, Family Health Center

Geographic Region 6: St. Mary's Health Center, Mercy Hospital, People's Health Center

Geographic Region 7: Jordan Valley, Cox and Mercy Hospitals, Family Medical Care Clinic

Geographic Region 9: Options for Women, Pregnancy Resource Center-Sikeston

Other Services

Other services to assist pregnant women in carrying her unborn child to term or to assist her in caring for her dependent child or placing her child for adoption are provided as appropriate and necessary to insure healthy outcomes for mother and baby. This includes services which are essential to the client but not covered in previously listed definitions. In the past some requests have included birth certificates, extenuator services and car repair. PMN will comply with contract requirements regarding the provision and billing for this category, including pre-approval and information on the other sources of funding that were attempted. None of the funds from this contract will be used to purchase tobacco or alcohol products. No funds will be expended for the purpose of performing, assisting or encouraging abortion, or to directly or indirectly subsidize abortion services.

Cultural Competency

PMN providers employ professional Case Managers who receive regular training on the importance of cultural competency. Case Managers employed by Catholic Charities of Kansas City-St Joseph are required to participate in Cultural Diversity and Valuing Diversity in the Workplace trainings each year. Lutheran Family and Children's Services, Missouri Baptist Children's Home and Good Shepherd Children and Family Services utilize trainings offered in the regions they serve which are centered on cultural competency. Some recent trainings that Case Managers attended were titled Multi Cultural Training, Oppression: A Trauma Informed Perspective and Children's Division Basic Training: Cultural Diversity. Case Managers also provide referrals related to the cultural needs of the clients they serve. For example, a Latino client in Region 6 may be referred to Casa de Salud, a clinic serving recent immigrants in the region or the International Institute, which assists in job placement. Case Managers in each region seek to meet the needs of the clients they serve with culturally appropriate referrals. If clients report any concerns about the cultural competency of outside providers, PMN Case Managers will help address any issues that interfere with full access to services.

15. For each geographic region proposed, the vendor should indicate the estimated number of clients the vendor anticipates serving annually for non-residential services and residential care services.

GEOGRAPHIC REGION	ESTIMATED ANNUAL NUMBER OF NON-RESIDENTIAL CLIENTS TO BE SERVED	ESTIMATED ANNUAL NUMBER OF RESIDENTIAL CARE CLIENTS TO BE SERVED
1	50	1
2	N/A	N/A
3	125	1
4	105	1
5	N/A	N/A
6	220	4
7	75	1
8	N/A	N/A
9	85	1

During prior Alternatives to Abortion contracts, the Pregnancy Maintenance Network (PMN) maintained records for clients receiving case management services from each of the four partner agencies. This historical data was reviewed during this bid process and the estimated annual numbers of non-residential clients to be served is a reflection of clients served in the past contract year. The estimated annual number of residential care clients to be served took into consideration this historical data as well. In the past, PMN agencies have only provided residential services in Region 6, with referrals being provided in the other regions served. As a result, the estimated annual number of clients served in Region 6 and the cost of service is greater than in the other regions.

Kleffner, Julie

From: Kleffner, Julie
Sent: Tuesday, October 18, 2016 10:35 AM
To: 'Christine Corcoran, MSW, LCSW'
Subject: RE: A2A BAFO 2 - Time Dated Response

The letter erroneously contained the following paragraph:

Another attachment is the BAFO #002 Request List which supersedes the BAFO Request List issued with BAFO #001. The BAFO #002 Request List includes a list of areas identified in your proposal as concerns, areas requiring clarifications, and areas of deficiency, which may not comply with the requirements of the RFP.

Please address the BAFO #001 Request List.

I apologize for any confusion.

Julie Kleffner, CPPB
Division of Purchasing
Harry S Truman Bldg, Room 630
Post Office Box 809
Jefferson City MO 65102-0809
Phone: 573-751-7656
Fax: 573-526-9816

From: Kleffner, Julie
Sent: Tuesday, October 18, 2016 9:29 AM
To: 'Christine Corcoran, MSW, LCSW'
Subject: A2A BAFO 2 - Time Dated Response
Importance: High

Attached is a request for a Best and Final Offer (BAFO) request for RFP30034901700042 for Alternatives to Abortion Program Services.

This email includes two attachments.

Please notify me by return email confirming that you received this email and that you were able to open the attachments.

Note: Your Best and Final Offer Response is requested by October 25, 2016.

Julie Kleffner, CPPB
Division of Purchasing
Harry S Truman Bldg, Room 630
Post Office Box 809
Jefferson City MO 65102-0809
Phone: 573-751-7656
Fax: 573-526-9816

From: Kleffner, Julie
Sent: Tuesday, September 27, 2016 1:23 PM
To: 'Christine Corcoran, MSW, LCSW'
Subject: A2A BAFO - Time Dated Response
Importance: High

Attached is a request for a Best and Final Offer (BAFO) request for RFPS30034901700042 for Alternatives to Abortion Program Services.

This email includes two attachments.

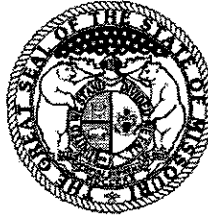
Please notify me by return email confirming that you received this email and that you were able to open the attachments.

Note: Your Best and Final Offer Response is requested by October 4, 2016.

Please note I am out of the office the afternoon of September 28 until the afternoon of October 3.

Julie Kleffner, CPPB
Division of Purchasing
Harry S Truman Bldg, Room 630
Post Office Box 809
Jefferson City MO 65102-0809
Phone: 573-751-7656
Fax: 573-526-9816

Jeremiah W. (Jay) Nixon
Governor



Doug Nelson
Commissioner

State of Missouri
OFFICE OF ADMINISTRATION
Division of Purchasing
301 West High Street, Room 630
Post Office Box 809
Jefferson City, Missouri 65102-0809
(573) 751-2387 Fax: (573) 526-9816
TTD: (800) 735-2966 Voice: (800) 735-2466
<http://oa.mo.gov/purchasing>

Karen S. Boeger
Director

October 18, 2016

Christine Corcoran
Lutheran Family and Children's Services of Missouri
9666 Olive Blvd., Suite 400
Saint Louis MO 63132-3025

Via e-mail: ChristineC@lfcs.org

Dear Ms. Corcoran:

Best and Final Offer (BAFO) #001 request for Alternatives to Abortion Program Services was issued on September 27, 2016. On September 29, 2016, an e-mail was issued by Jason Kolks advising Lutheran Family and Children's Services of Missouri the BAFO #001 request for RFPS30034901700042 was indefinitely extended. However, this letter shall constitute a second official request by the State of Missouri to enter into competitive negotiations with your company. The BAFO #001 response is due by the date specified herein for BAFO #002.

Attached hereto is a new complete copy of the RFP that includes changes to the RFP as a result of the BAFO #001 request as well as additional changes to the RFP as a result of BAFO #002 request.

Attached hereto is a new complete copy of the RFP that includes changes to the RFP as a result of the BAFO #001 request as well as additional changes to the RFP as a result of BAFO #002 request.

The RFP includes Best and Final Offer #002 (BAFO #002) as the cover page. Be sure to have an authorized representative of your organization complete and sign the BAFO #001 and BAFO #002 cover pages and return with your BAFO response.

Another attachment is the BAFO #002 Request List which supersedes the BAFO Request List issued with BAFO #001. The BAFO #002 Request List includes a list of areas identified in your proposal as concerns, areas requiring clarifications, and areas of deficiency, which may not comply with the requirements of the RFP.

In your response to BAFO #002, you may make any modification, addition, or deletion deemed necessary to your proposal. However, it is not necessary for you to resubmit your entire proposal. Only the signed BAFO #002 Forms and any portions of your proposal that are being revised as a result of this request for a Best and Final Offer need to be submitted.

Christine Corcoran

October 18, 2015

Page 2

Furthermore, please understand that your response to this BAFO request is your final opportunity to ensure that (1) all mandatory requirements of the RFP have been met, (2) all RFP requirements are adequately described since all areas of the proposal are subject to evaluation, and (3) this is your best offer, including a reduction or other change to pricing. Also, ensure your response to this BAFO request addresses the latest version of each paragraph/exhibit of the RFP.

You are requested to respond to this BAFO request by submitting a written, sealed "Best and Final Offer" BY 5:00 PM CENTRAL TIME ON October 25, 2016 to:

Attention: Julie Kleffner
Division of Purchasing
301 West High Street, Truman Building, Room 630
Jefferson City, MO 65101

The outside of the packet containing the BAFO response needs to state, "BAFO for RFPS30034901700042" on the lower left corner. Please include the original plus three (3) copies (for a total of four (4) documents) of your response. Faxed or e-mailed responses are not acceptable.

You are reminded that pursuant to section 610.021, RSMo, proposal documents including any best and final offer documents are considered closed records and shall not be divulged in any manner until after a contract is executed or all proposals are rejected. Furthermore, you and your agents (including subcontractors, employees, consultants, or anyone else acting on their behalf) must direct all questions or comments regarding the RFP, the evaluation, etc. to me, as the buyer of record. Neither you nor your agents may contact any other state employee regarding any of these matters during the negotiation and evaluation process. Inappropriate contacts or release of information about your proposal or BAFO are grounds for suspension and/or exclusion from specific procurements.

If you have any questions regarding this BAFO request, please contact me at (573) 751-7656 or e-mail me at Julie.Kleffner@oa.mo.gov.

Sincerely,

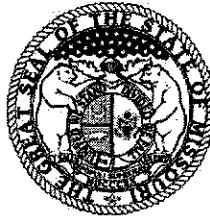


Julie Kleffner

c: Evaluation Team
RFPS30034901700042

Attachments: RFP including BAFO form

Jeremiah W. (Jay) Nixon
Governor



Doug Nelson
Commissioner

State of Missouri
OFFICE OF ADMINISTRATION
Division of Purchasing
301 West High Street, Room 630
Post Office Box 809
Jefferson City, Missouri 65102-0809
(573) 751-2387 Fax: (573) 526-9816
TTD: (800) 735-2966 Voice: (800) 735-2466
<http://oa.mo.gov/purchasing>

Karen S. Boeger
Director

September 27, 2016

Christine Corcoran
Lutheran Family and Children's Services of Missouri
9666 Olive Blvd., Suite 400
Saint Louis MO 63132-3025

Via e-mail: ChristineC@lfcs.org

Dear Ms. Corcoran:

In accordance with paragraph 3.2 of RFP30034901700042 for Alternative to Abortion Program Services, this letter shall constitute an official request by the State of Missouri to enter into competitive negotiations with Lutheran Family and Children's Services of Missouri. Included with this letter are two attachments.

One attachment is a complete copy of the RFP, including revisions to the RFP. The cover page of the attached RFP is the Best and Final Offer #001 form. This BAFO #001 form must be completed, signed by an authorized representative of your organization, and returned with your BAFO response. Signing the BAFO #001 form confirms your understanding and agreement to comply with the provisions and requirements of the RFP as modified by any previously issued RFP amendments by this request for a BAFO.

Another attachment is the Best and Final Offer (BAFO) Request List which includes a request for specific responses to identified RFP paragraphs.

In your response to this Best and Final Offer, you may make any modification, addition, or deletion deemed necessary to your proposal. However, please be advised that it is not necessary for you to resubmit your entire proposal. Only the signed BAFO #001 form, your response to the BAFO Request List, and any portions of your proposal that are being revised as a result of this request for a Best and Final Offer need be submitted. Your BAFO response is your final opportunity to ensure that (1) all mandatory requirements of the RFP have been met, (2) all RFP requirements are adequately described since all areas of the proposal are subject to evaluation, and (3) this is your best offer, including a reduction or other change to pricing.

You are requested to respond to this request for a BAFO by submitting a written, sealed "Best and Final Offer" by **5:00 p.m. Central Time on October 4, 2016**

Attention: Julie Kleffner
Division of Purchasing
301 West High Street, Truman Building, Room 630
Jefferson City, MO 65101-1517

The outside of the packet containing the BAFO response needs to state, "BAFO for RFPS30034901700042" on the lower left corner. Please include the **original plus five (5) copies (for a total of six (6) documents)** of your response. In addition, the offeror should provide one (1) copy of the response in a Microsoft compatible format on a CD(s) or flash drive. Faxed or e-mailed responses are not acceptable.

You are reminded that pursuant to section 610.021, RSMo, *proposal documents including any best and final offer documents* are considered closed records and shall not be divulged in any manner until after a contract is executed or all proposals are rejected. Furthermore, you and your agents (including subcontractors, employees, consultants, or anyone else acting on their behalf) must direct all questions or comments regarding the RFP, the evaluation, etc. to me, as the buyer of record. Neither you nor your agents may contact any other state employee regarding any of these matters during the negotiation and evaluation process. Inappropriate contacts or release of information about your proposal or BAFO are grounds for suspension and/or exclusion from specific procurements.

If you have any questions regarding this BAFO request, please contact me at (573) 751-7656 or e-mail me at julie.kleffner@oa.mo.gov. Your efforts in working with the State of Missouri to ensure a thorough evaluation of your proposal are sincerely appreciated.

Sincerely,



Julie Kleffner

c: Evaluation Team
RFPS30034901700042

Attachments: Best and Final Offer Request List
RFP including BAFO #001 form

LUTHERAN FAMILY AND CHILDREN'S SERVICES OF MISSOURI

BEST AND FINAL OFFER REQUEST LIST

BAFO NO. 001 FOR RFP RFPS30034901700042

1. IDENTIFIED DEFICIENCIES AND AREAS OF CONCERN/CLARIFICATION:

- 1.1 The licensure from the state of North Dakota alone for Marianne Brachman, Credentialed Case Manager, may not meet the requirements of paragraph 2.10.1 a. of the RFP. Marianne Brachman must meet the licensure requirements for the state of Missouri as defined by section 337.600 RSMo.

Paragraph 2.10.8 of the RFP states, "The award of a contract does not constitute agreement or represent any form of approval that the personnel identified in the contractor's awarded proposal comply with the Personnel Requirements stated herein. In the event the contractor's personnel are found not to be compliant with the Personnel Requirements, the contractor must replace any personnel with personnel that meet the Personnel Requirements.

With the BAFO response, Lutheran Family and Children's Services of Missouri is requested to indicate understanding and agreement with paragraph 2.10.8 of the RFP.

Original

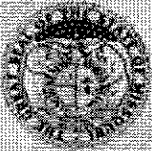
**RESPONSE TO RFPS30034901700042
ALTERNATIVES TO ABORTION PROGRAM**

PROPOSED SERVICE REGIONS: 1, 3, 4, 6, 7, 9

PROPOSAL SUBMITTED BY
LUTHERAN FAMILY AND CHILDREN'S SERVICES OF MISSOURI (LFCS)

On behalf of the Pregnancy Maintenance Network (PMN) collaboration of

Catholic Charities of Kansas City-St. Joseph, Inc.
Good Shepherd Children and Family Services
Lutheran Family and Children's Services of Missouri
MBCH Children and Family Ministries



**STATE OF MISSOURI
OFFICE OF ADMINISTRATION
DIVISION OF PURCHASING (PURCHASING)
REQUEST FOR PROPOSAL (RFP)**

SOLICITATION/OPPORTUNITY (OPP) NO.: RFPS30034901700042
TITLE: Alternatives to Abortion Program Services
ISSUE DATE: 07/15/16

REQ NO.: NR 300 30007000001
BUYER: Julie Kleffner
PHONE NO.: (573) 751-7656
E-MAIL: Julie.Kleffner@sa.mo.gov

RETURN PROPOSAL NO LATER THAN: August 26, 202016 AT 2:00 PM CENTRAL TIME (END DATE)

VENDORS ARE ENCOURAGED TO RESPOND ELECTRONICALLY THROUGH [HTTPS://MISSOURIBUYS.MO.GOV](https://missouribuy.mo.gov) BUT MAY RESPOND BY HARD COPY (See Mailing Instructions Below)

MAILING INSTRUCTIONS: Print or type Solicitation/OPP Number and End Date on the lower left hand corner of the envelope or package. Delivered sealed proposals must be in the Purchasing office (301 W High Street, Room 630) by the return date and time.

<p>RETURN PROPOSAL TO: (U.S. Mail) PURCHASING PO BOX 809 JEFFERSON CITY MO 65102-0809</p>	<p>or</p>	<p>(Courier Service) PURCHASING 301 WEST HIGH STREET, RM 630 JEFFERSON CITY MO 65101-1517</p>
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CONTRACT PERIOD: Effective Date of Contract through May 31, 2017

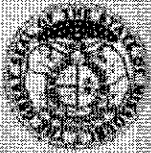
DELIVER SUPPLIES/SERVICES FOB (Free On Board) DESTINATION TO THE FOLLOWING ADDRESS:

Office of Administration
Commissioner's Office
State Capitol Building, Room 125
Jefferson City MO 65101

The vendor hereby declares understanding, agreement and certification of compliance to provide the items and/or services, at the prices quoted, in accordance with all requirements and specifications contained herein and the Terms and Conditions Request for Proposal (Revised 10/19/15). The vendor further agrees that the language of this RFP shall govern in the event of a conflict with his/her proposal. The vendor further agrees that upon receipt of an authorized purchase order from the Division of Purchasing or when a Notice of Award is signed and issued by an authorized official of the State of Missouri, a binding contract shall exist between the vendor and the State of Missouri. The vendor shall understand and agree that in order for their proposal to be considered for evaluation, they must be registered in MissouriBUYS. If not registered at time of proposal opening, the vendor must register in MissouriBUYS upon request by the state immediately after proposal opening.

SIGNATURE REQUIRED

<p>VENDOR NAME</p> <p>Lutheran Family and Children's Services of Missouri</p>	<p>Missouri's SYSTEM ID (SEE VENDOR PROFILE - MAIN INFORMATION SCREEN)</p> <p>91282</p>
<p>MAILING ADDRESS</p> <p>9666 Olive Boulevard, Suite 400</p>	
<p>CITY, STATE, ZIP CODE</p> <p>Saint Louis, MO 63132-3025</p>	
<p>CONTACT PERSON</p> <p>Christine Corcoran</p>	<p>EMAIL ADDRESS</p> <p>ChristineC@lfc.org</p>
<p>PHONE NUMBER</p> <p>314-787-5100, ext. 2731</p>	<p>FAX NUMBER</p> <p>314-785-7307</p>
<p>VENDOR TAX FILING TYPE WITH IRS (CHECK ONE)</p> <p><input type="checkbox"/> Corporation <input type="checkbox"/> Individual <input type="checkbox"/> State/Local Government <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietor <input checked="" type="checkbox"/> IRS Tax-Exempt</p>	
<p>AUTHORIZED SIGNATURE</p> <p><i>Paulette Foerster</i></p>	<p>DATE</p> <p>August 18, 2016</p>
<p>PRINTED NAME</p> <p>Paulette Foerster</p>	<p>TITLE</p> <p>Interim Executive Director</p>



STATE OF MISSOURI
OFFICE OF ADMINISTRATION
DIVISION OF PURCHASING (PURCHASING)
REQUEST FOR PROPOSAL (RFP)

ADDENDUM NO.: 1
SOLICITATION/OPPORTUNITY (OPP) NO.: RFPS30034901700042
TITLE: Alternatives to Abortion Program Services
ISSUE DATE: 08/11/16

REQ NO.: NR 300 300700001
BUYER: Julie.kleffner@oa.mo.gov
PHONE NO.: (573) 751-7656
E-MAIL: Julie.Kleffner@oa.mo.gov

RETURN PROPOSAL NO LATER THAN: August 26, 2016 AT 2:00 PM CENTRAL TIME (END DATE)

VENDORS ARE ENCOURAGED TO RESPOND ELECTRONICALLY THROUGH [HTTPS://MISSOURIBUY.MO.GOV](https://missouribuy.mo.gov) BUT MAY RESPOND BY HARD COPY (See Mailing Instructions Below)

MAILING INSTRUCTIONS: Print or type Solicitation/OPP Number and End Date on the lower left hand corner of the envelope or package. Delivered sealed proposals must be in the Purchasing office (301 W High Street, Room 630) by the return date and time.

RETURN PROPOSAL AND ADDENDUM(S) TO:

(U.S. Mail)
PURCHASING
PO BOX 809

or

(Courier Service)
PURCHASING
301 WEST HIGH STREET, ROOM 630
JEFFERSON CITY MO 65101-1517

JEFFERSON CITY MO 65102-0809

CONTRACT PERIOD: Effective Date of Contract Through May 31, 2017

DELIVER SUPPLIES/SERVICES FOB (Free On Board) DESTINATION TO THE FOLLOWING ADDRESS:

Office of Administration
Commissioner's Office of Administration
State Capitol Building, Room 125
Jefferson City MO 65101

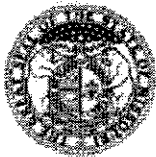
The vendor hereby declares understanding, agreement and certification of compliance to provide the items and/or services, at the prices quoted, in accordance with all terms and conditions, requirements, and specifications of the original RFP as modified by this and any previously issued RFP addendums. The vendor should, as a matter of clarity and assurance, also sign and return all previously issued RFP addendum(s) and the original RFP document. The vendor agrees that the language of the original RFP as modified by this and any previously issued RFP addendums shall govern in the event of a conflict with his/her proposal. The vendor further agrees that upon receipt of an authorized purchase order from the Division of Purchasing or when a Notice of Award is signed and issued by an authorized official of the State of Missouri, a binding contract shall exist between the vendor and the State of Missouri. The vendor shall understand and agree that in order for their proposal to be considered for evaluation, they must be registered in MissouriBUIYS. If not registered at time of proposal opening, the vendor must register in MissouriBUIYS upon request by the state immediately after proposal opening.

SIGNATURE REQUIRED

VENDOR NAME		MissouriBUIYS SYSTEM ID (SEE VENDOR PROFILE - MAIN INFORMATION SCREEN)	
Lutheran Family and Children's Services of Missouri		91282	
MAILING ADDRESS			
9666 Olive Boulevard, Suite 400			
CITY, STATE, ZIP CODE			
Saint Louis, MO 63132-3025			
CONTACT PERSON		EMAIL ADDRESS	
Christine Corcoran		ChristineC@lfes.org	
PHONE NUMBER		FAX NUMBER	
314-787-5100, ext. 2731		314-785-7507	
VENDOR TAX FILING TYPE WITH IRS (CHECK ONE)			
<input type="checkbox"/> Corporation <input type="checkbox"/> Individual <input type="checkbox"/> State/Local Government <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietor <input checked="" type="checkbox"/> IRS Tax-Exempt			
AUTHORIZED SIGNATURE		DATE	
<i>Paulette Foerster</i>		August 18, 2016	
PRINTED NAME		TITLE	
Paulette Foerster		Interim Executive Director	

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STATE OF MISSOURI
OFFICE OF ADMINISTRATION
DIVISION OF PURCHASING (PURCHASING)
REQUEST FOR PROPOSAL (RFP)

ADDENDUM NO.: 2

SOLICITATION/OPPORTUNITY (OPP) NO.: RFPS30034901700042

TITLE: Alternatives to Abortion Program Services

ISSUE DATE: 08/25/16

REQ NO.: NR 300 300700001

BUYER: Julie.kleffner@oa.mo.gov

PHONE NO.: (573) 751-7656

E-MAIL: Julie.Kleffner@oa.mo.gov

RETURN PROPOSAL NO LATER THAN: August 26, 2016 AT 2:00 PM CENTRAL TIME (END DATE)

VENDORS ARE ENCOURAGED TO RESPOND ELECTRONICALLY THROUGH
[HTTPS://MISSOURIBUYS.MO.GOV](https://missouribuyss.mo.gov) BUT MAY RESPOND BY HARD COPY (See Mailing Instructions Below)

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Lutheran Family and Children's Services of Missouri		91282	
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9666 Olive Boulevard, Suite 400			
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Christine Corcoran		ChristineC@lfcs.org	
PHONE NUMBER		FAX NUMBER	
314-787-5100, ext. 2731		314-785-7307	
VENDOR TAX FILING: TYPE WITH IRS (CHECK ONE)			
<input type="checkbox"/> Corporation <input type="checkbox"/> Individual <input type="checkbox"/> State/Local Government <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietor <input checked="" type="checkbox"/> IRS Tax-Exempt			
AUTHORIZED SIGNATURE		DATE	
<i>Paulette Foerster</i>		August 25, 2016	
PRINTED NAME		TITLE	
Paulette Foerster		Interim Executive Director	

Vendor Qualification


EXHIBIT ACERTIFICATION REGARDING COMPLIANCE WITH SECTION 188.325, RSMO

Regarding performing, inducing, or assisting in the performing or inducing of or referring for abortions

The vendor certifies, by submission of the proposal and by signing below, that the vendor is not an organization, or an affiliate of organizations, that "perform or induce, assist in the performing or inducing of or refer for abortions".

Paulette M. Foerster Interim Executive Director
Name and Title of Authorized Representative

Paulette M. Foerster 8-17-2016
Signature Date

 **IRS** Department of the Treasury
Internal Revenue Service
P.O. Box 2508, Room 4010
Cincinnati OH 45201

In reply refer to: 4077589886
Feb. 27, 2015 LTR 4167C 0
43-0652650 000000 00
00037675
BODC: TE



LUTHERAN FAMILY AND CHILDRENS
SERVICES OF MISSOURI
9666 OLIVE BLVD STE 400
SAINT LOUIS MO 63132

027033

Employer Identification Number: 43-0652650
Group Exemption Number: 9385
~~Person to Contact: Mr. Schatz~~
Toll Free Telephone Number: 1-877-829-5500

Dear Taxpayer:

This is in response to your Jan. 20, 2015, request for information about your tax-exempt status.

Our records indicate that you were issued a determination letter in April 1957, and that you are currently exempt under section 501(c)(3) of the Internal Revenue Code.

Based on the information supplied, we recognized the subordinates named on the list you submitted as exempt from Federal income tax under section 501(c)(3) of the Code.


Donors may deduct contributions to you as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to you or for your use are deductible for Federal estate and gift tax purposes if they meet the applicable provisions of sections 2055, 2106 and 2522 of the Code.

If you have any questions, please call us at the telephone number shown in the heading of this letter.

Sincerely yours,

Tamera Ripperda
Director, Exempt Organizations

Cost

Refer to BAFU 

PRICING PAGE

Line Item	Geographic Region	Original Contract Period Maximum Annual Total Price (based upon a 12-month period)	Minimum Annual Total Price Required to Provide Services (based upon a 12-month period)	Non-Residential Services, Price Per Client, Per Month	Residential Care Services, Price Per Client, Per Month
1	1	<u>\$81,861</u>	<u>\$51,245</u>	<u>\$190.62</u>	<u>\$150</u>
2	2	<u>NA</u>	<u>NA</u>	<u>NA</u>	<u>NA</u>
3	3	<u>\$198,890</u>	<u>\$131,778</u>	<u>\$156.42</u>	<u>\$150</u>
4	4	<u>\$122,808</u>	<u>\$90,000</u>	<u>\$305.58</u>	<u>\$150</u>
5	5	<u>NA</u>	<u>NA</u>	<u>NA</u>	<u>NA</u>
6	6	<u>\$238,878</u>	<u>\$160,000</u>	<u>\$212.57</u>	<u>\$150</u>
7	7	<u>\$167,087</u>	<u>\$160,000</u>	<u>\$353.17</u>	<u>\$150</u>
8	8	<u>NA</u>	<u>NA</u>	<u>NA</u>	<u>NA</u>
9	9	<u>\$90,945</u>	<u>\$65,000</u>	<u>\$135.07</u>	<u>\$150</u>

**Vendor's
Experience,
Reliability, and
Expertise of
Personnel**

EXHIBIT B
VENDOR INFORMATION

The vendor should provide the following information about the vendor's organization:
--

- 1. Provide a brief company history, including the founding date and number of years in business as currently constituted.**

Lutheran Family and Children's Services of Missouri (LFCS) traces its history back 148 years. What began as an orphans' home in 1868 transformed into an incorporated social service agency in the 1960's. LFCS first obtained a Child-Placing license in 1962, shortly after that process became available. The agency's current structure and Certificate of Incorporation is dated February 13, 1964. Currently, LFCS has 211 employees --6 senior management members, 20 administrative support staff and 148 direct service personnel. Offices include sites in the greater St. Louis area, Cape Girardeau, Springfield, and Columbia, and offices in St. Charles, Union and Jefferson City.

- 2. Describe the nature of the vendor's business, type of services performed, etc. Identify the vendor's website address, if any.**

Lutheran Family and Children's Services of Missouri has agreed to take the lead in responding to RFPS30034901700042 on behalf of the Adoption and Foster Care Coalition of Missouri (AFCC), which is a current service provider of Alternatives to Abortion services through contract with the Office of Administration. The AFCC will be dissolving upon completion of the current Alternatives to Abortion contract. The advocacy portion of the AFCC has been absorbed by the Missouri Coalition of Children's Agencies, which left the primary role of AFCC the maintenance and provision of the Alternatives to Abortion funds through the Pregnancy Maintenance Network (PMN). It was determined that it would be more effective for the existing partners to continue to provide services with LFCS serving as the lead agency. The four agencies that make up the PMN are Lutheran Family and Children's Services of Missouri, Catholic Charities of Kansas City-St. Joseph, Inc., Good Shepherd Children and Family Services, and MBCH Children and Family Ministries. These agencies provide counseling, support and direct services for pregnant women, so they can achieve a healthy outcome for both themselves and their children. The Pregnancy Maintenance Network (PMN) has provided services under the ATA contract since its inception in the mid-nineties. The partner agencies of the PMN are described below.

Lutheran Family and Children's Services of Missouri provides pregnancy counseling, foster care, adoption, mentoring, child care, outpatient mental health and disaster response programs. As a multi-program social agency, LFCS programs focus on providing children, individuals, and families greater hope and resources to live a full and productive life. Program services strive to strengthen families, prevent and treat the results of abuse and neglect, and support mental health. LFCS serves hundreds of pregnant and newly parenting women across Missouri each year. In order to do that, the agency engages in effective community partnerships and successfully administers state and local service contracts. LFCS staff provides comprehensive case management, direct assistance, relevant external referrals, and evidence-based family-strengthening strategies, to affect healthy outcomes.

Lutheran Family and Children's Services of Missouri website: www.lfcsmo.org

Since 1879, **Catholic Charities of Kansas City - St. Joseph, Inc. (CC-KC)**, has touched the lives of thousands of individuals and families by providing social services regardless of race, gender, economic or religious background. Catholic Charities provides adoption services, services to pregnant women, foster

care, teen community awareness, mental health services, education and training, community services, homeless prevention, financial stability, foreclosure intervention and senior care services. While the organization is driven by Catholic social teachings, approximately 75% of the people served by Catholic Charities are not of the Catholic faith.

Catholic Charities of Kansas City-St Joseph website: www.catholiccharities-kcsj.org

Good Shepherd Children and Family Services (GS) is a non-profit organization that provides a continuum of services for children and families. Licensed to provide child placing services as well as residential care--specifically a maternity residential program for pregnant and parenting young women which offers family focus when applicable. GS has a full foster care program providing case management and resource development. The Expectant Parent program offers counseling and case management services for women of all ages who need support around their pregnancy. Adoption programming provides screening, assessment, placement and post placement services for adoptive families.

Good Shepherd Children and Family Services website: www.goodshepherdstl.org

MBCH Children and Family Ministries has served countless numbers of children and families since 1886 through its residential programs. In more recent years, the agency has greatly expanded its community-based services. Residential services include therapeutic group homes and transitional living (both group home and scattered sites), a maternity home, a home for developmentally disabled adults, and human trafficking rescue (adults and minors). Community-based services include family reunification services, family foster care (case management), treatment foster care, adoption services, foster care services, relative/kinship care services, respite care services, training and assessments for foster and/or adoptive parents, and in home pregnancy services.

MBCH Children and Family Ministries website: www.mbchcfm.org

3. Provide a list of and a short summary of information regarding the vendor's current contracts for similar services.

The Pregnancy Maintenance Network agencies hold a number of contracts for various social services. They are described below.

Alternatives to Abortion (ATA) contract: This contract is administered by the Missouri Office of Administration. The Adoption and Foster Care Coalition (AFCC) holds the contract and Lutheran Family and Children's Services of Missouri, Catholic Charities KC-St. Joseph, Good Shepherd Children and Family Services, and MBCH Children and Family Ministries are subcontractors under AFCC. Services have been provided under this contract since 1997.

Contract held by AFCC; Lutheran Family and Children's Services of Missouri, Catholic Charities Kansas City-St. Joseph, Good Shepherd Children and Family Services, and MBCH Children and Family Ministries are subcontractors.

Foster Care Adoption Resource Services contract: Lutheran Family and Children's Services holds the contract with the Children's Division. This contract includes training and assessment for prospective foster and adoptive families referred by the state agency. Services have been provided under this contract and its predecessors since the mid-1990s. MBCH provides resources through the Foster Care/Adoption Resource Services, Training, and Consultation contract for many circuits statewide, and particularly in the Southeast area.

Contract held by Lutheran Family and Children's Services of Missouri with subcontractor Good Shepherd Children and Family Services; MBCH Children and Family Ministries also holds the contract.

Recruitment, Licensure/Approval, & Retention of Missouri Resource Homes: This is a pilot contract awarded to Cornerstones of Care to provide services for the recruitment, recommendation for licensure/approval, and maintenance/retention of resource homes for children in Children's Division custody.

Contract held by MBCH Children and Family Ministries is a subcontractor of Cornerstones of Care.

Nurturing Kids and Nurturing Teens contracts: Lutheran Family and Children's Services and Good Shepherd Children and Family Services both hold contracts with the St. Louis County Children's Service Fund. The contract services are to offer education, case management, counseling and guidance to families toward achieving a stable home environment. Services have been provided under this contract since August 2010, when the first awards were made.

Contracts held by Lutheran Family and Children's Services and Good Shepherd Children and Family Services.

Intensive Family Reunification Services (IFRS): MBCH Children and Family Ministries was awarded the Intensive Family Reunification Services contract in southwest Missouri and began offering service in 2007. MBCH CFM has one case manager assigned to this program. This program has had excellent outcomes and resulted in the continuous success of numerous families.

Contract held by MBCH Children and Family Ministries.

Performance Based Foster Care Case Management contract:

The purpose of the Foster Care Case Management program is to serve children, birth parents, relatives, and adoptive parents. The agency provides all case management activities for the children and families assigned by the Children's Division. Such services include but are not limited to crisis intervention, placement services and supervision, referrals and authorizations for services through community providers, permanency planning, court testimony, facilitation of parent/child and sibling visits, and all other activities associated with foster care case management. In addition, agencies may recruit, train, and license foster/adoptive homes. The goal of the program is to find safe, stable, and permanent homes for children.

Contract held by Our Little Haven Service Agency. Lutheran Family and Children's Services of Missouri and Good Shepherd Children and Family Services are two of the subcontractors.

Contract held by Missouri Alliance for Children and Families, Cornerstones of Care. MBCH Children and Family Ministries is a member agency of MACF and provides services under this contract. MBCH Children and Family Ministries is a subcontractor of Cornerstones of Care for this work.

Residential Services: Therapeutic group home services are provided on MBCH's Byrne Campus (Kansas City area), and the Hutchens Campus (Mount Vernon). Emergency shelter services are also provided at these same locations through contract with the Children's Division.

Contract held by MBCH Children and Family Ministries.

Transitional Living Program Contract: Transitional living services are provided through the Transitional Living Program Contract with the state of Missouri in southwest Missouri with two group homes on the Hutchens Campus and ten apartments for scattered site services in Springfield. The Lowe-Frillman campus in St. Louis has one group home and two apartments.

Contract held by MBCH Children and Family Ministries.

Turn Around Program: The purpose of the Turn Around Program is to provide support for families of incarcerated individuals and offer a new start for persons leaving prison including case management, emergency assistance, and help with re-integration needs such as birth certificate/ID cards, clothing, and employment and treatment referrals. The program serves 200+ clients per year.

Contract held by Catholic Charities Kansas City-St. Joseph.

4. List, identify, and provide reasons for each contract/client gained and lost in the past two (2) years.

The members of the Adoption and Foster Care Coalition of Missouri (AFCC) have not gained or lost any contract in the past 2 years. Regarding contracts gained by the AFCC Pregnancy Maintenance Network member agencies, the St. Louis County Children's Service Fund awarded Lutheran Family and Children's Services (LFCS) and Good Shepherd (GS) with contracts for the Nurturing Kids and Nurturing Teens programs in 2015. The Foster Care Adoption Resource contract was awarded to LFCS with an effective date of October 2009 and GS is a subcontractor of LFCS for that state contract. Catholic Charities Kansas City -St. Joseph (CC-KC) maintains contracts that can be renewed annually with MHDC, Shelter Plus Care, Missouri Office of Administration, HUD and SSVF. In the past two years, CC-KC has gained 2 contracts with the Department of Corrections, one with the Department of Labor, one with Missouri's Children's Trust Fund, one with the Missouri Housing Trust Fund and several with Department of Housing and Urban Development. Several CC-KC contracts ended with the Department of Corrections and City/County/State HPRP projects. LFCS did not apply for the most recent Crisis Care contracts.

5. In the table below, indicate if the vendor is a not-for-profit entity that promotes one or more of the following four (4) purposes established by Congress under 42 U.S.C. Section 601 of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996. If a not-for-profit entity, describe past experience relative to the four (4) purposes.

Not-for-profit entity that promotes one or more of the following (4) purposes: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Purposes Identify specific information about experience:	Clearly identify and describe the experience
Providing assistance to needy families so that children may be cared for in their own homes or in the homes of relatives	All of the agencies providing services under this contract and others target families who are living in poverty and are at risk for child abuse and neglect. The majority of services are provided in the home. Our case management services are designed to assist families in maintaining their children in their homes.
Ending the dependence of needy parents on government benefits by promoting job preparation, work, and marriage	Our treatment planning with parents focuses on increasing education and job related skills so that parents can adequately provide for their children through viable and ongoing employment.
Preventing and reducing the incidence of out-of-wedlock pregnancies and establish annual numerical goals for preventing and reducing the incidence of these pregnancies	All of our programs discuss the risks of HIV, STI's and unplanned pregnancies. In addition to this, the pregnancy program discusses the importance of birth spacing.
Encouraging the formation and maintenance of two-parent families	The importance of father involvement is strongly encouraged, and the fathers are provided services when requested.

6. Describe the structure of the organization including any board of directors, partners, top departmental management, corporate organization, corporate trade affiliations, any parent/subsidiary affiliations with other firms, etc.

Lutheran Family and Children's Services of Missouri is a not for profit 501(c)(3) organization and has agreed to take a leadership role in coordinating the network of providers who deliver services. Agencies working with LFCS to provide services include Catholic Charities, Good Shepherd and MBCH Children and Family Ministries.

Lutheran Family and Children's Services of Missouri is governed by a 30+ member Board of Directors. Four (4) Regional Advisory Committees also work to advance the mission of LFCS around the state. The agency's Senior Management Team consists of the President/CEO, Vice President of Finance, Vice President of Programs, Vice President of Development, Director of Human Resources and the Director of School Counseling and Disaster Response.

Catholic Charities is a private, non-profit organization governed by a board of directors. The Chief Officers of the agency are Chief Executive Officer, Chief Operating Officer, Chief Financial Officer and Chief Human Resource Officer.

Good Shepherd is a member agency of the Catholic Charities Federation of Agencies, Archdiocese of St. Louis. The agency is governed by a Board of Directors consisting of 20 volunteers. The executive team includes an Executive Director and Directors of Community Services, Treatment Services, Business and Development.

MBCH Children and Family Ministries has a 17- member board of trustees with a primary purpose of developing, implementing, maintaining, supporting, and providing services and programs for the care of children and youth, and adults with impairments, and to provide preventive and redemptive services and programs for children, parents, and families. The board meets on a quarterly basis and also reports quarterly to the board of trustees of Missouri Baptist Children's Home (the parent corporation).

The administrative staff of MBCH Children and Family Ministries consists of President and Treasurer, Vice President and Regional Vice President. There are six program directors.

7. Provide a list summarizing any pending or final legal proceedings involving you or your company that took place in any court of law, administrative tribunal or alternative dispute resolution process that was filed, settled or gone to final judgment within the last three (3) years. The summary need not disclose confidential information of a disputed allegation of fact or law, but must contain the allegations made and/or contested or findings of the court of law, tribunal or dispute resolution process. Failure to provide a full and accurate summary of legal proceedings may result in rejection of the proposal or termination of any subsequent contract.

Catholic Charities of Kansas City-St. Joseph has two pending law suits that have been filed against the agency. The allegations involved unlawful firing of two staff members.

EXHIBIT CCERTIFICATION REGARDING EXEMPTION FROM INCOME TAXATION

The vendor certifies, by submission of the proposal and by signing below, that the vendor is "exempt from income taxation pursuant to the United States Internal Revenue Code".

Paulette M. Foerster 8-17-2016
Name and Title of Authorized Representative

Paulette M. Foerster 8-17-2016
Signature Date

EXHIBIT D**CURRENT/PRIOR EXPERIENCE**

The vendor should copy and complete this form documenting the vendor and subcontractor's current/prior experience considered relevant to the services required herein. In addition, the vendor is advised that if the contact person listed for verification of services is unable to be reached during the evaluation, the listed experience may not be considered.

Vendor Name or Subcontractor Name: <u>Lutheran Family & Children's Services of Missouri</u> (if reference is for a Subcontractor):	
Reference Information (Current/Prior Services Performed For:)	
Name of Reference Company/Client:	Office of Administration
Address of Reference Company/Client:	Commissioner's Office State Capitol Building, Room 125 Jefferson City, MO 65101
Reference Contact Person Name, Phone #, and E-mail Address:	Emily Kraft Phone: 573.751.8502 - Fax: 573.751.1212 Emily.Kraft@oa.mo.gov
Title/Name of Service/Contract	Alternatives to Abortion
Dates of Service/Contract:	1998-Present
If service/contract has terminated, specify reason:	
Size of Service such as: ✓ Number of Individuals Being Served ✓ Total Annual Value/Volume	Between 400-500 pregnant women are served by LFCS annually. The award to provide services to these women and their children for FY '12 was \$569,193 with a total award of \$1,658,257.87 for contract ERS17509001.
Size of Service/Contract (in terms of vendor's total amount of business)	Close to 95%
Description of Services Performed, such as: ✓ Population Served ✓ Type of Services Performed ✓ Geographic Area Served ✓ Vendor's specific duties and strategic objective	LFCS of Missouri provides services through subcontracts with CCKC, MBCH, and GS through the Pregnancy Maintenance Network (PMN). Network members provide services to women during their pregnancy and up to one year following the birth. Through PMN, case management and other support services are provided to pregnant and newly parenting women. The expected child, the infant, the mother, father and other family members also receive services. GS provides these services in the greater St Louis area, CCKC in the Kansas City and Northwest region, while MBCH and LFCS provide these services throughout MO.
Personnel Assigned to Service/Contract (include position title):	Christine Corcoran, MSW, LCSW, LFCS Director of Child Welfare and Regional Operations; Kristen Setterlund, MSW, LCSW, LFCS Program Manager, ATA Liason; Teresa Hayner, MSW, LCSW, Director of Operations at Good Shepherd; Von Hulin, MSW, ACSW, LCSW, Director of Community Based Programs at MBCH; Jamie Batschke, MA Ed., BSW, Program Manager of Services to Young Families at CCKC

EXHIBIT D**CURRENT/PRIOR EXPERIENCE**

The vendor should copy and complete this form documenting the vendor and subcontractor's current/prior experience considered relevant to the services required herein. In addition, the vendor is advised that if the contact person listed for verification of services is unable to be reached during the evaluation, the listed experience may not be considered.

Vendor Name or Subcontractor Name: <u>Lutheran Family & Children's Services of Missouri</u> (if reference is for a Subcontractor):	
Reference Information (Current/Prior Services Performed For:)	
Name of Reference Company/Client:	Spaulding for Children
Address of Reference Company/Client:	16250 Northland Drive, Suite 120 Southfield MI 48075
Reference Contact Person Name, Phone #, and E-mail Address:	Patricia, Hannah or Kris Henneman 248-395-8893, phannah@spaulding.org or khenneman@spaulding.org
Title/Name of Service/Contract	Infant Adoption Training Awareness Program
Dates of Service/Contract:	Services provided from 2-10-05 to present
If service/contract has terminated, specify reason:	Department of Health and Human Services' did not renew funding for the Infant Adoption Awareness Training Program.
Size of Service such as: ✓ Number of Individuals Being Served ✓ Total Annual Value/Volume	From 2005-2011, annually served 300-900 health care professionals with annual budgets between \$101,500 and \$165,000. Federal cuts for 2011-2013 have reduced contract to approximately 100 professionals with annual budgets of approximately \$35,000
Size of Service/Contract (in terms of vendor's total amount of business)	5-8%
Description of Services Performed, such as: ✓ Population Served ✓ Type of Services Performed ✓ Geographic Area Served ✓ Vendor's specific duties and strategic objective	LFCS recruits, trains and coordinates social work professionals in the State of Missouri to provide training on a Federally approved curriculum "Understanding Infant Adoption." LFCS is the lead agency for this federally funded contract as awarded to Spaulding, providing administrative oversight to staff and subcontractors, as well as outreach, recruitment, scheduling, coordination and training under the oversight of Spaulding.
Personnel Assigned to Service/Contract (include position title):	Michelle Studer, LCSW, ACSW, Coordinator, Infant Adoption Training Initiative Janice Scheurer, LCSW, Director, Child Welfare Program

EXHIBIT D**CURRENT/PRIOR EXPERIENCE**

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Vendor Name or Subcontractor Name: <u>Lutheran Family and Children's Services</u> (if reference is for a Subcontractor):	
Reference Information (Current/Prior Services Performed For:)	
Name of Reference Company/Client:	Franklin County Children and Families Community Resource Board
Address of Reference Company/Client:	P.O. Box 126 Union, MO 63084
Reference Contact Person Name, Phone #, and E-mail Address:	Annie Schulte 314-540-5451 fccrboard@gmail.com
Title/Name of Service/Contract	Nurturing Kids/Nurturing Teens
Dates of Service/Contract:	2009 to present
If service/contract has terminated, specify reason:	N/A
Size of Service such as: ✓ Number of Individuals Being Served ✓ Total Annual Value/Volume	LFCS serves an average of 50 clients per year.
Size of Service/Contract (in terms of vendor's total amount of business)	FY2017 budget projects \$81,000 in revenue.
Description of Services Performed, such as: ✓ Population Served ✓ Type of Services Performed ✓ Geographic Area Served ✓ Vendor's specific duties and strategic objective	We serve pregnant and parenting teens; in addition, we serve families with children aged 0 to 5 at risk of child abuse or neglect. We provide case management, counseling, and parenting skill development. Our goals include a healthy pregnancy outcome, enhanced knowledge of parenting skills and protecting children from abuse and neglect thereby preventing placement outside the home.
Personnel Assigned to Service/Contract (include position title):	Christine Corcoran, Director of Child Welfare, Kristen Setterlund Program Manager; Our staff includes 2 front line staff.

EXHIBIT D**CURRENT/PRIOR EXPERIENCE**

The vendor should copy and complete this form documenting the vendor and subcontractor's current/prior experience considered relevant to the services required herein. In addition, the vendor is advised that if the contact person listed for verification of services is unable to be reached during the evaluation, the listed experience may not be considered.

Vendor Name or Subcontractor Name: <u>Lutheran Family and Children's Services</u> (if reference is for a Subcontractor):	
Reference Information (Current/Prior Services Performed For:)	
Name of Reference Company/Client:	Springfield Partners Foster Care Coalition
Address of Reference Company/Client:	PREFERRED FAMILY HEALTHCARE INC 1111 S GLENSTONE AVE PO BOX 1277 SPRINGFIELD MO 65801-1277
Reference Contact Person Name, Phone #, and E-mail Address:	Marilyn Nolan, CEO 417-425-5221 mnolan@pfh.org
Title/Name of Service/Contract	Foster Care Case Management Contract
Dates of Service/Contract:	2008 to present
If service/contract has terminated, specify reason:	N/A
Size of Service such as: ✓ Number of Individuals Being Served ✓ Total Annual Value/Volume	LFCS serves an average 150 foster families per year.
Size of Service/Contract (in terms of vendor's total amount of business)	FY2017 budget projects \$525,000 in revenue.
Description of Services Performed, such as: ✓ Population Served ✓ Type of Services Performed ✓ Geographic Area Served ✓ Vendor's specific duties and strategic objective	We serve children removed from their parents due to abuse and neglect and placed in the custody of the state agency. We provide case management services to the child and family with a focus on achieving permanency. In addition, our service includes the development of kinship, foster and adoptive families to care for the children we serve. We work in Greene County.
Personnel Assigned to Service/Contract (include position title):	Christine Corcoran, Director of Child Welfare, Laura Farmer, Regional Director; Our staff includes 3 front line staff.

EXHIBIT D
CURRENT/PRIOR EXPERIENCE

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Vendor Name or Subcontractor Name: <u>Lutheran Family and Children's Services</u> (if reference is for a Subcontractor):	
Reference Information (Current/Prior Services Performed For:)	
Name of Reference Company/Client:	St. Louis Partners Foster Care Coalition
Address of Reference Company/Client:	4316 Lindell, St. Louis, MO 63108
Reference Contact Person Name, Phone #, and E-mail Address:	Michael Fitzgerald 314-533-2229x284 mfitzgerald@ourlittlehaven.org
Title/Name of Service/Contract	Foster Care Case Management Contract
Dates of Service/Contract:	2005 to present
If service/contract has terminated, specify reason:	N/A
Size of Service such as: ✓ Number of Individuals Being Served ✓ Total Annual Value/Volume	LFCS serves an average of 98 children and their families on an annual basis.
Size of Service/Contract (in terms of vendor's total amount of business)	FY2017 budget projects \$1.1 million in revenue which is approximately 38% of the child welfare budget.
Description of Services Performed, such as: ✓ Population Served ✓ Type of Services Performed ✓ Geographic Area Served ✓ Vendor's specific duties and strategic objective	We serve children removed from their parents due to abuse and neglect and placed in the custody of the state agency. We provide case management services to the child and family with a focus on achieving permanency. In addition, our service includes the development of kinship, foster and adoptive families to care for the children we serve. We work in the St. Louis City, St. Louis County, St. Charles County and Franklin County.
Personnel Assigned to Service/Contract (include position title):	Christine Corcoran, Director of Child Welfare, Debbie Wolf, Director of Foster Care Case Management; Our staff includes 2 supervisors and 8 front line staff.

EXHIBIT D**CURRENT/PRIOR EXPERIENCE**

The vendor should copy and complete this form documenting the vendor and subcontractor's current/prior experience considered relevant to the services required herein. In addition, the vendor is advised that if the contact person listed for verification of services is unable to be reached during the evaluation, the listed experience may not be considered.

Vendor Name or Subcontractor Name: <u>Lutheran Family and Children's Services</u> (if reference is for a Subcontractor):	
Reference Information (Current/Prior Services Performed For:)	
Name of Reference Company/Client:	St. Louis County Children's Services Fund
Address of Reference Company/Client:	222 S. Meramec Avenue Suite 202 Clayton, MO 63105
Reference Contact Person Name, Phone #, and E-mail Address:	Samantha Stangl 314-615-5864 SStangl@stlouisco.com
Title/Name of Service/Contract	Nurturing Kids/Nurturing Teens
Dates of Service/Contract:	2010 to present
If service/contract has terminated, specify reason:	N/A
Size of Service such as: ✓ Number of Individuals Being Served ✓ Total Annual Value/Volume	LFCS serves an average of 300 clients per year.
Size of Service/Contract (in terms of vendor's total amount of business)	FY2017 budget projects \$156,000 in revenue.
Description of Services Performed, such as: ✓ Population Served ✓ Type of Services Performed ✓ Geographic Area Served ✓ Vendor's specific duties and strategic objective	We serve pregnant and parenting teens; in addition, we serve families with children aged 0 to 5 at risk of child abuse or neglect. We provide case management, counseling, and parenting skill development. Our goals include a healthy pregnancy outcome, enhanced knowledge of parenting skills and protecting children from abuse and neglect thereby preventing placement outside the home.
Personnel Assigned to Service/Contract (include position title):	Christine Corcoran, Director of Child Welfare, Kristen Setterlund Program Manager; Our staff includes 3 front line staff.

EXHIBIT D**CURRENT/PRIOR EXPERIENCE**

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Vendor Name or Subcontractor Name: <u>Catholic Charities of Kansas City-St. Joseph</u> (if reference is for a Subcontractor):	
Reference Information (Current/Prior Services Performed For:)	
Name of Reference Company/Client:	Children's Trust Fund of Missouri
Address of Reference Company/Client:	301 W High Street PO Box 1641 Jefferson City, MO 65101 Jefferson City, MO 65102
Reference Contact Person Name, Phone #, and E-mail Address:	Laura Malzner 573-751-6511 laura.malzner@oa.mo.gov
Title/Name of Service/Contract	Services for Young Families: Family Strengthening and Crisis Intervention
Dates of Service/Contract:	July 1, 2015-present
If service/contract has terminated, specify reason:	N/A
Size of Service such as: ✓ Number of Individuals Being Served ✓ Total Annual Value/Volume	The goal is to serve 90 parents; 70 children. At the six month milestone; the agency had served 144 parents and 74 children.
Size of Service/Contract (in terms of vendor's total amount of business)	Less than 1% (specifically .27%) of the agency's total budget
Description of Services Performed, such as: ✓ Population Served ✓ Type of Services Performed ✓ Geographic Area Served ✓ Vendor's specific duties and strategic objective	<p>The Children's Trust Fund of Missouri is focused on general child abuse and neglect prevention and has funded Catholic Charities of Kansas City-St. Joseph to help support safe, nurturing environments for children and families.</p> <p>The target population serviced is at-risk low/moderate income families living in/around the Kansas City and St. Joseph metro areas. A majority of the families are led by single mothers, including mothers with reduced educational attainment (11th grade or below) and annual incomes below \$7,000. These families have high risk for excessive household stress and exacerbated risk for child abuse/neglect.</p> <p>Catholic Charities of Kansas City-St. Joseph staff work with clients to attain improvement in three main areas: (1) increasing parenting skills, knowledge, and confidence; (2) strengthening household resilience and resources; and (3) decreasing both immediate and longer-term barriers to stability and wellbeing. Services include case management, parenting education, child development assessments and emergency assistance.</p>

Personnel Assigned to Service/Contract (include position title):	Jamie Batschke, Program Manager Angela Zahner Shipley, Family Development Specialist Marianne Brachman, Family Development Specialist Kimberly Barnes, Family Development Specialist Kenyetta Canady, Family Development Specialist
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EXHIBIT D**CURRENT/PRIOR EXPERIENCE**

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Vendor Name or Subcontractor Name: <u>Catholic Charities of Kansas City-St. Joseph</u> (if reference is for a Subcontractor):	
Reference Information (Current/Prior Services Performed For:)	
Name of Reference Company/Client:	Jackson County Children's Division
Address of Reference Company/Client:	615 E. 13 th Street, Kansas City, MO 64106
Reference Contact Person Name, Phone #, and E-mail Address:	Tanya Keys Regional Director 615 E. 13 th Street, Kansas City, MO 64106 (816) 889-2475 Tanya.keys@dss.mo.gov
Title/Name of Service/Contract	Foster Care/Adoption Case Management Performance Based Contract
Dates of Service/Contract:	2005-2012
If service/contract has terminated, specify reason:	Catholic Charities entered into a partnership with Crittenton Children's Center called Family Advocates and was awarded the contract. Crittenton decided they wanted to go into the next contract without the partnership.
Size of Service such as: ✓ Number of Individuals Being Served ✓ Total Annual Value/Volume	Awarded amount- 87 cases \$428,860
Size of Service/Contract (in terms of vendor's total amount of business)	87 awarded cases- 100% of total services
Description of Services Performed, such as: ✓ Population Served ✓ Type of Services Performed ✓ Geographic Area Served ✓ Vendor's specific duties and strategic objective	<p>The Children's Trust Fund of Missouri is focused on general child abuse and neglect prevention and has funded Catholic Charities of Kansas City-St. Joseph to help support safe, nurturing environments for children and families.</p> <p>The target population serviced is at-risk low/moderate income families living in/around the Kansas City and St. Joseph metro areas. A majority of the families are led by single mothers, including mothers with reduced educational attainment (11th grade or below) and annual incomes below \$7,000. These families have high risk for excessive household stress and exacerbated risk for child abuse/neglect.</p>

	Catholic Charities of Kansas City-St. Joseph staff work with clients to attain improvement in three main areas: (1) increasing parenting skills, knowledge, and confidence; (2) strengthening household resilience and resources; and (3) decreasing both immediate and longer-term barriers to stability and wellbeing. Services include case management, parenting education, child development assessments and emergency assistance.
Personnel Assigned to Service/Contract (include position title):	Jarrold Sanderson- Director of Children and Family Services Mark Churchill- Assistance Director of Family Services Shawntae Jones- Program Manager Valerie Jones-Administrative Assistant Jessica Thompson, Alicia Falter, Jody McCreedy, Ann Restituto, Cassie Byfield, Heather Hughes- case managers

EXHIBIT D**CURRENT/PRIOR EXPERIENCE**

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Vendor Name or Subcontractor Name: Good Shepherd Children and Family Services (if reference is for a Subcontractor):	
Reference Information (Current/Prior Services Performed For:)	
Name of Reference Company/Client:	St. Louis Partners Foster Care Consortium
Address of Reference Company/Client:	4316 Lindell, St. Louis, Mo 63108
Reference Contact Person Name, Phone #, and E-mail Address:	Michael Fitzgerald; CEO 314-533-2229 x284; mfitzgerald@ourlittlehaven.org
Title/Name of Service/Contract	Foster Care Case Management Contract
Dates of Service/Contract:	2005 to present
If service/contract has terminated, specify reason:	N/A
Size of Service such as: ✓ Number of Individuals Being Served ✓ Total Annual Value/Volume	Good Shepherd serves an average of 150 children and their families on an annual basis.
Size of Service/Contract (in terms of vendor's total amount of business)	FY2017 budget projects 1.5 million in revenue which is approximately 37% of the total agency budget
Description of Services Performed, such as: ✓ Population Served ✓ Type of Services Performed ✓ Geographic Area Served ✓ Vendor's specific duties and strategic objective	We serve children removed from their parents due to abuse and neglect and placed in the custody of the state agency. We provide case management services to the child and family with a focus on achieving permanency. In addition, our service includes the development of kinship, foster and adoptive families to care for the children we serve. We work in St. Louis City, St. Louis County and Jefferson County.
Personnel Assigned to Service/Contract (include position title):	Teresa Hayner; Director of Community Services; Mary Thome; Director of Foster Care; Our staff includes 2 Foster Care Supervisors; 1 Resource Development Supervisor and 18 Front line staff.

EXHIBIT D**CURRENT/PRIOR EXPERIENCE**

The vendor should copy and complete this form documenting the vendor and subcontractor's current/prior experience considered relevant to the services required herein. In addition, the vendor is advised that if the contact person listed for verification of services is unable to be reached during the evaluation, the listed experience may not be considered.

Vendor Name or Subcontractor Name: Good Shepherd Children and Family Services (if reference is for a Subcontractor):	
Reference Information (Current/Prior Services Performed For:)	
Name of Reference Company/Client:	St. Louis County Children's Service Fund
Address of Reference Company/Client:	222 S. Meramec Avenue; Suite 202 Clayton, Mo. 63105
Reference Contact Person Name, Phone #, and E-mail Address:	Stangl, Samantha 314-615-5864 <SStangl@stlouisco.com>
Title/Name of Service/Contract	Nurturing Kids/Nurturing Teens
Dates of Service/Contract:	Current contract is for 1/01/2016 through 12/31/2016; Consistently funded under this grant since August 2010.
If service/contract has terminated, specify reason:	N/A
Size of Service such as: ✓ Number of Individuals Being Served ✓ Total Annual Value/Volume	Our current contract is for approximately \$525,000 annually. We project serving 35 women and their children in the community based expectant parent program and 50 teen parents and their children in the maternity shelter program.
Size of Service/Contract (in terms of vendor's total amount of business)	Approximately 12% of total agency budget
Description of Services Performed, such as: ✓ Population Served ✓ Type of Services Performed ✓ Geographic Area Served ✓ Vendor's specific duties and strategic objective	We serve pregnant and parenting teens; in addition, we serve families with children aged 0 to 10 at risk of abuse or neglect. We provide Case management, counseling, and parenting skill development. With our teen clients, we provide shelter. Geographic area served is limited to St. Louis County. Our goals include a healthy pregnancy outcome, enhanced knowledge of parenting skills and protecting children from abuse or neglect thereby preventing placement outside the home.
Personnel Assigned to Service/Contract (include position title):	Kathy Fowler, Director of Treatment Services and Teresa Hayner, Director of Community Services.

EXHIBIT D**CURRENT/PRIOR EXPERIENCE**

The vendor should copy and complete this form documenting the vendor and subcontractor's current/prior experience considered relevant to the services required herein. In addition, the vendor is advised that if the contact person listed for verification of services is unable to be reached during the evaluation, the listed experience may not be considered.

Vendor Name or Subcontractor Name: <u>MBCH Children and Family Ministries</u> (if reference is for a Subcontractor):	
Reference Information (Current/Prior Services Performed For:)	
Name of Reference Company/Client:	Missouri Alliance for Children and Families
Address of Reference Company/Client:	PO Box 104265 Jefferson City, MO 65110
Reference Contact Person Name, Phone #, and E-mail Address:	LeAnn Haslag, (573)556-8090 lhaslag@ma-cf.org
Title/Name of Service/Contract	Foster Care Case Management and Family Resource Development
Dates of Service/Contract:	September 1, 2005 to Present
If service/contract has terminated, specify reason:	N/A
Size of Service such as: ✓ Number of Individuals Being Served ✓ Total Annual Value/Volume	Base caseload of 352 120 in St. Louis, 102 in Joplin, 130 in Springfield
Size of Service/Contract (in terms of vendor's total amount of business)	13%
Description of Services Performed, such as: ✓ Population Served ✓ Type of Services Performed ✓ Geographic Area Served ✓ Vendor's specific duties and strategic objective	Foster Care Case Management and Resource Development services for children and families in the St. Louis area, Central MO, and Southwest MO.
Personnel Assigned to Service/Contract (include position title):	David Burch, Regional Visce President Kristy Ogden, Program Director Von Hulin, Program Director

EXHIBIT D**CURRENT/PRIOR EXPERIENCE**

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Vendor Name or Subcontractor Name: <u>MBCH Children and Family Ministries</u> (if reference is for a Subcontractor):	
Reference Information (Current/Prior Services Performed For:)	
Name of Reference Company/Client:	Children's Division- Phelps County
Address of Reference Company/Client:	1111 Kingshighway, Suite A, Rolla, MO
Reference Contact Person Name, Phone #, and E-mail Address:	Alisha Otis, 573-368-2426, Alisha.g.otis@dss.mo.gov
Title/Name of Service/Contract	Foster Care Adoption Resource Services
Dates of Service/Contract:	2009 to present
If service/contract has terminated, specify reason:	N/A
Size of Service such as: ✓ Number of Individuals Being Served ✓ Total Annual Value/Volume	\$13,440
Size of Service/Contract (in terms of vendor's total amount of business)	Less than 1%
Description of Services Performed, such as: ✓ Population Served ✓ Type of Services Performed ✓ Geographic Area Served ✓ Vendor's specific duties and strategic objective	STARS and Spaulding Classes, Module Classes, and Home Studies for Foster and Adoptive Families in the region.
Personnel Assigned to Service/Contract (include position title):	Jennifer Garland, MSW, LCSW, Pregnancy Services Supervisor

EXHIBIT E
EXPERTISE OF KEY PERSONNEL

Title of Position: <u>Director</u> Geographic Region(s): <u>4, 6, 7 & 9</u>	
Name of Person:	Christine Corcoran
Educational Degree (s): include college or university, major, and dates	University of Missouri Columbia, Bachelor's degree Dec 1990 University of Missouri Columbia, Masters in Social Work degree May 1996
License(s)/Certification(s), #(s), expiration date(s), if applicable:	Licensed Clinical Social Worker, License Number 005449, expiration Sept. 2017. Licensed since 1997
Specialized Training Completed.	Motivational Interviewing, Trauma Informed Service Delivery, Nurturing Parenting Program
# of years' experience in area of service proposed to provide:	24 years
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	Director of Child Welfare Statewide for Lutheran Family and Children's Services. She has worked for LFCS for 12 years and oversees all of the child welfare programs and services, including the Alternatives to Abortion contract.
Describe this person's responsibilities over the past 12 months.	Supervised and directed all of the child welfare programs, including pregnancy and parenting case management services.
Previous employer(s), positions, and dates	Division of Family Services from June 1991-December 2002, various positions including Investigator, Children's Services Worker II, Children's Services Specialist, Program Development Specialist, Unit Manager, Assistant Deputy Director for foster care and adoption
Identify specific information about experience in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
✓ Early childhood development	Participated in a variety of classes and training in child development including the evidenced-based parenting curriculum, Nurturing Parents (2010), Children's Trust Fund Protective Factors training (2013)
✓ Family/marital counseling	Saw couples and families in therapy in her MSW practicum experience in 1995 and has attended a variety of workshops and trainings over the years in counseling interventions.
✓ Social work	Masters in Social Work and has worked delivering micro and macro social work services for 24 years.
✓ Case management	Began her career delivering case management services to children and families where child abuse and neglect was identified. Worked with families in which children were removed from their homes due to CA/N from 1991-2002. Also worked with foster and adoptive families for over 24 years in her roles with the State and Lutheran Family and Children's Services.

Title of Position: <u>Director</u>	
Geographic Region(s): <u>4, 6, 7 & 9</u>	
✓ Program administration	Began administering programs for the State of Missouri in the areas of foster care and adoption in 1994 and has continued to administer programs throughout her career in various capacities through state, local, federal and grant funding.

EXHIBIT E
EXPERTISE OF KEY PERSONNEL

Title of Position: <u>Contract Representative/Program Manager</u> Geographic Region(s): <u>6</u>	
Name of Person:	Kristen Setterlund
Educational Degree (s): include college or university, major, and dates	Bachelor of Social Work, Univ of Missouri-Columbia, 2005 Master of Social Work, Univ of Missouri-Columbia, 2006
License(s)/Certification(s), #(s), expiration date(s), if applicable:	Licensed Clinical Social Worker, #2011016940, Expires 9/30/16
Specialized Training Completed.	Nurturing Parenting Program Facilitator ASIST (Applied Suicide Intervention Skills Training) Infant Adoption Training Initiative Trainer
# of years' experience in area of service proposed to provide:	10 years of experience
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	Employee, 10 years
Describe this person's responsibilities over the past 12 months.	Provided counseling and case management services to pregnant and parenting women and their families. Supervised five staff in the St. Louis region that provided counseling and case management services to clients. Assisted in the implementation of the Alternatives to Abortion program, addressed billing concerns and served as a liaison between staff and the contract manager.
Previous employer(s), positions, and dates	Missouri Girls Town, Practicum Student, 2004 Lutheran Family and Children's Services (LFCS) Practicum Student, 2006 Camp Noah Program Lead Coordinator with LFCS in 2006
Identify specific information about experience in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
✓ Early childhood development	Nurturing Parenting Facilitator since 2010. Continued attending trainings specific to child development.
✓ Family/marital counseling	Provided pregnancy counseling, which includes family members and counseling regarding relationships.
✓ Social work	Obtained BSW in 2005 and MSW in 2006. Became a LCSW in 2011 and began practicing social work at Lutheran Family and Children's Services in 2006.
✓ Case management	Provided case management services to clients currently enrolled in services at LFCS. Began providing case management in 2006.
✓ Program administration	Became the lead pregnancy counseling worker for the LFCS office in St. Louis in 2012. Became program manager in 2015.

EXHIBIT E
EXPERTISE OF KEY PERSONNEL

Title of Position: <u>Credentialed Case Manager</u>	
Geographic Region(s): <u>6</u>	
Name of Person:	Anna Franz
Educational Degree (s): include college or university, major, and dates	Missouri Baptist University, Bachelors in Human Services and Psychology, 2004-2008 Missouri Baptist University, Masters in Counseling, 2010-2011
License(s)/Certification(s), #(s), expiration date(s), if applicable:	Licensed Professional Counselor, License #2013044073, expiration: June 30, 2017
Specialized Training Completed.	Trained in the Nurturing Skills for Families curriculum, Motivational Interviewing Training, Child Abuse and Neglect Training
# of years' experience in area of service proposed to provide:	3 years, 4 months
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	Employee, 3 years and 4 months
Describe this person's responsibilities over the past 12 months.	Provided direct case management and pregnancy counseling to clients one-on-one primarily in the client's home. These services have included pregnancy counseling regarding parenting vs adoption as well as relationship issues and support systems. Connected clients with needed resources, helped with goal setting and planning and parenting education.
Previous employer(s), positions, and dates	Missouri Department of Social Services, Children's Division, Children's Service Worker, 2009-2010 Missouri Department of Social Services, Division of Youth Services, Youth Service Worker, 2012
Identify specific information about experience in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
✓ Early childhood development	Nanny: 2004-2008; Private nanny for a family with three young children. Teacher at a childcare center: 2008-2009; Primary teacher in a classroom of typically 6-12 two year old children. Worker has administered the Nurturing Skills for Families curriculum with clients at Lutheran Family and Children's Services from 2012-2016.
✓ Family/marital counseling	Trained in Introduction to Family Systems Theory and Practice, November 28, 2012 offered by the St. Louis University School of Social Work.
✓ Social work	
✓ Case management	Worked as direct service staff in case management for over five years for both the State of Missouri and Lutheran Family and Children's Services 2009-2016.
✓ Program administration	

EXHIBIT E
EXPERTISE OF KEY PERSONNEL

Title of Position: <u>Credentialed Case Manager</u>	
Geographic Region(s): <u>6</u>	
Name of Person:	Hannah Woods
Educational Degree (s): include college or university, major, and dates	Master of Social Work- University of Missouri-St. Louis Aug 2012- Dec 2014
License(s)/Certification(s), #(s), expiration date(s), if applicable:	LMSW #2015020169
Specialized Training Completed.	Perinatal Mood Disorder certificate training, 2015
# of years' experience in area of service proposed to provide:	2 years
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	Employee- 1 year
Describe this person's responsibilities over the past 12 months.	Provided counseling, advocacy, and case management services to individuals and families in program
Previous employer(s), positions, and dates	Haven House St. Louis: Family Support Coordinator- March 2009-Dec 2013; Ronald McDonald House: Relief Staff- June 2008- June 2012
Identify specific information about experience in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
✓ Early childhood development	Early childhood development provider at LFCS. Provided parenting education and information on child development to parents in program. Jan 2015- present
✓ Family/marital counseling	Provided individual counseling to clients in LFCS program as birth parent counselor. Jan 2015- present
✓ Social work	Provided comprehensive social work services from 2009-present as Family Support Coordinator, MSW intern, and Social Worker.
✓ Case management	Provided case management to oncology patients as MSW intern at St. Louis Children's Hospital in 2014. Provided case management to individuals and families at LFCS as social worker from Jan 2015- present.
✓ Program administration	As Family Support Coordinator, developed and implemented graduate level social work intern program during 2011-2013 at Haven House St. Louis.

EXHIBIT E
EXPERTISE OF KEY PERSONNEL

Title of Position: <u>Credentialed Case Manager</u>	
Geographic Region(s): <u>6</u>	
Name of Person:	Linda Downey
Educational Degree (s): include college or university, major, and dates	MSW; University of Missouri St. Louis 2013
License(s)/Certification(s), #(s), expiration date(s), if applicable:	LMSW License #2014007561 Expires 9/30/2017
Specialized Training Completed.	Nurturing Parenting Program Facilitator ASIST (Applied Suicide Intervention Skills Training) Infant Adoption Training Initiative Trainer
# of years' experience in area of service proposed to provide:	7 years' experience
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	Employee, 7 years
Describe this person's responsibilities over the past 12 months.	Provided counseling and case management services to pregnant and parenting families.
Previous employer(s), positions, and dates	Behavioral Health Response, Crisis Line and Suicide Lifeline Counselor (intern), August 2013-December 2013
Identify specific information about experience in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
✓ Early childhood development	Nurturing Parenting Facilitator since 2010; Continued to attend trainings specific to child development.
✓ Family/marital counseling	Provided pregnancy counseling and family counseling to current clients and have been with LFCS since 2008.
✓ Social work	Obtained BSW in May 2008; MSW December 2013; Currently have LMSW and working on LCSW. Have been practicing social work since 2008 at Lutheran Family and Children's Services.
✓ Case management	Provided case management services to clients currently enrolled in program. Have been providing case management services (referrals to appropriate resources, education, etc.) since 2008 at LFCS.
✓ Program administration	Completed Nurturing Parenting Program Facilitator training in 2010; Have been administrating PMN program and Nurturing Kids program with LFCS since 2008.

EXHIBIT E
EXPERTISE OF KEY PERSONNEL

Title of Position: <u>Credentialed Case Manager</u>	
Geographic Region(s): <u>6</u>	
Name of Person:	Stephanie Ford
Educational Degree (s): include college or university, major, and dates	Masters in Social Work, St Louis University, Social Work, Dec.2015
License(s)/Certification(s), #(s), expiration date(s), if applicable:	Missouri LMSW, Certification #2015044584, Exp. 09/30/17
Specialized Training Completed.	
# of years' experience in area of service proposed to provide:	1 year
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	Employee, less than 1 year
Describe this person's responsibilities over the past 12 months.	Provided effective counseling, advocacy, and case management to client population with semi complex and complex issues, established and maintained appropriate, current community networks and interactions, provided consultation and input to leadership for program, attended continued education and staffings in accordance with licensing standards.
Previous employer(s), positions, and dates	Christian Hospital, Pharmacy Technician II, 11/2011-01/2016
Identify specific information about experience in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
✓ Early childhood development	Social Work intern, 05/2014-08/2014. Hilltop Child Development Center, Completed Head start assessments, provided case management for families in need, observed children ages 2-5 during play
✓ Family/marital counseling	
✓ Social work	Social Work intern, 08/2014-05/2015. Saint Louis Public Schools. Provided social/emotional support during school hours, provided mental health referrals, provided resources for basic needs, home visits, made attendance phone calls and referrals to St. Louis City court, co-facilitated classroom guidance lessons, responded to crisis situations.
✓ Case management	
✓ Program administration	

EXHIBIT E
EXPERTISE OF KEY PERSONNEL

Title of Position: <u>Program Manager</u> Geographic Region(s): <u>9</u>	
Name of Person:	Leisa Y. Blissett
Educational Degree (s): include college or university, major, and dates	Southeast Missouri State University, Bachelors of Science degree May 1997 University of Missouri Columbia, Masters in Social Work degree December 2003
License(s)/Certification(s), #(s), expiration date(s), if applicable:	Licensed Master Social Worker; license # 2015021423
Specialized Training Completed.	Children & Families Crisis Pregnancy Train the Trainer Understanding Infant Adoption/Infant Adoption Training Initiative Motivational Interviewing Trauma Focused CBT Mental Health Services/Crisis Intervention Co-Occurring Disorders: Diagnosis and Treatment Sexual abuse/trauma, Children with Special Needs
# of years' experience in area of service proposed to provide:	19 years working with children, families, & individuals experience in mental health, abuse/neglect, unplanned/crisis pregnancy,
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	Regional Director of Southeast Missouri office for Lutheran Family and Children's Services. She has worked for LFCS a total of 6 years. 5 years as a child welfare worker as a Pregnancy Counselor Worker and an Adoption Specialist. Taught community based Abstinence Only Classes to youth in various settings. Resigned from Child Welfare and was employed with another agency for approximately 7 years; returned to LFCS 1 year ago as the Regional Director.
Describe this person's responsibilities over the past 12 months.	Supervised and directed all programs including adoption, pregnancy and parenting case management, Older Adult Services, Assisted Custody Exchange & Supervised Visitation Programs. Maintained effective relations with community, professional social service and church constituencies. Operated regional office within approved budgetary guidelines and maintained an active and effective advisory board.
Previous employer(s), positions, and dates	Community Counseling Center Children's Services Supervisor 2008-2015; Pyramid Home Health Services Medical Social Worker; 2007-2008; Lutheran Family & Children's Services Social Worker II 2004-2009
Identify specific information about experience in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience

Title of Position: <u>Program Manager</u> Geographic Region(s): <u>9</u>	
✓ Early childhood development	Leisa has a Bachelors and Masters in Social Work; Leisa has participated in a variety of classes and training in child development. Formal training and experience working with infants and young children at Parents as Teachers, Missouri First Steps, LFCS, Head start, etc.
✓ Family/marital counseling	Leisa saw some couples and families in therapy in her MSW practicum experience in 2002 and has attending a variety of workshops and trainings over the years in counseling interventions.
✓ Social work	Leisa has a Bachelors and Masters in Social Work and has worked delivering micro and macro social work services.
✓ Case management	Leisa has a Bachelors and Masters in Social Work. Her career consisted of delivering case management services to children and families through Head start, contractual work through Missouri Children's Division. Leisa also worked with Pregnancy Counseling and Case Management, Lutheran Family and Children's Services, 2004-2009.
✓ Program administration	Leisa is Director at LFCS 2/15-present

EXHIBIT E
EXPERTISE OF KEY PERSONNEL

Title of Position: <u>Credentialed Case Manager</u> Geographic Region(s): <u>9</u>	
Name of Person:	Evelyn Beussink
Educational Degree (s): include college or university, major, and dates	University of Missouri – Columbia, BA in Psychology 1996 University of Southern Mississippi, MS in Counseling Psychology, 1998
License(s)/Certification(s), #(s), expiration date(s), if applicable:	MO Licensed Professional Counselor exp. 6/30/17 License NO 2001022327
Specialized Training Completed.	-Train the Trainer Understanding Infant Adoption/Infant Adoption Training Initiative -Train the Trainer STARS and SPÄULDING -motivational interviewing -training in safe sleep for infants -Parenting training: Love and Logic training, Train the Trainer Family Wellness – Survival Skills for Families, Redirecting Children's Behavior, Nurturing Parenting -Adoption trainings: attachment, transracial adoption, infertility, grief and loss, The Lifecycle of Adoption, embryo adoption -various substance abuse trainings -various supervisory trainings
# of years' experience in area of service proposed to provide:	12 years' experience in pregnancy counseling and case management 5 years' experience in mental health working with children, families, and individuals
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	Employee of Lutheran Family and Children's Services for 12 years
Describe this person's responsibilities over the past 12 months.	Pregnancy counseling and case management Adoption counseling with pregnant women and potential adoptive families Assisted the Director in administrative responsibilities
Previous employer(s), positions, and dates	Community Counseling Center, Cape Girardeau MO, 3/99 – 12/03; The Guidance Center, Murfreesboro TN 8/98 – 2/99
Identify specific information about experience in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
✓ Early childhood development	Pregnancy Counseling and Case Management, Lutheran Family and Children's Services, 12/03 to present Child and Family Therapist, Community Counseling Center, 3/99 – 12/03 Protective Services Therapist, The Guidance Center, 8/98 – 2/99
✓ Family/marital counseling	Child and Family Therapist, Community Counseling Center, 3/99 – 12/03

Title of Position: <u>Credentialed Case Manager</u>	
Geographic Region(s): <u>9</u>	
	Protective Services Therapist, The Guidance Center, 8/98 – 2/99
✓ Social work	Pregnancy Counseling and Case Management, Lutheran Family and Children's Services, 12/03 to present Child and Family Therapist, Community Counseling Center, 3/99 – 12/03 Protective Services Therapist, The Guidance Center, 8/98 – 2/99
✓ Case management	Pregnancy Counseling and Case Management, Lutheran Family and Children's Services, 12/03 to present
✓ Program administration	Director, Lutheran Family and Children's Services Southeast office, 1/13 – 2/15 Assistant Director, LFCS, 2/15 to present

EXHIBIT E
EXPERTISE OF KEY PERSONNEL

Title of Position: <u>Credentialed Case Manager</u>	
Geographic Region(s): <u>9</u>	
Name of Person:	Marie Walker
Educational Degree (s): include college or university, major, and dates	Bachelors of Science Degree from Southeast Missouri State University 1981; Currently working to complete a Master of Public Administration, Strayer University (to be completed April 2017)
License(s)/Certification(s), #(s), expiration date(s), if applicable:	N/A
Specialized Training Completed.	Child Protective Services Crisis Intervention Children and Family Case Management/Investigations Adult protective Service Case management/Investigations Interviewing Risk Assessment
# of years' experience in area of service proposed to provide:	(29.5 years.) 18 year with Child Welfare 10 year with Adult Protective Services 1.5 year Health Education/ Health Disparities Educating pregnant and parenting women and families
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	Worked with Children and Families with the Missouri Division of Family Services for 28 years providing both preventive and protective services to families in need. Worked within the school system in the Cape Girardeau school district through the Caring Communities initiative for six years as a school-based social worker. Partnered with LFCS on cases while working with adult protective services. Worked 1.5 years providing health Education with five (5) bootheel counties of Mississippi, Scott, New Madrid, Pemiscot and Dunklin.
Describe this person's responsibilities over the past 12 months.	Provided case management services to pregnant and parenting young women in Perry and Cape Girardeau Counties which included home visits, resource development, coaching, modeling, assessing and monitoring clients' progress to empower them to become self-sufficient with healthy pregnancy outcomes.
Previous employer(s), positions, and dates	Department of Health and Senior Services-Adult protective and Community Worker II-2004-2014; Tennessee Department of Vocational Rehabilitation-VR-Counselor II-2002.2003; Missouri Division of Family Services-Children Services work I-II, Investigator, School Based Social Worker- 1983, 2001.
Identify specific information about experience in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
✓ Early childhood development	Bachelor's degree in Social work and over 800 hours of training in Child abuse/neglect/protective services through the State of Missouri

Title of Position: <u>Credentialed Case Manager</u>	
Geographic Region(s): <u>9</u>	
✓ Family/marital counseling	Approximately 60 hours in Family Therapy through a program offered through the Division of Youth Services
✓ Social work	Possesses a Bachelor's of Science Degree in Social Work and has worked delivering social work services in various arenas for over 28 years.
✓ Case management	Bachelors of Science in Social Work and has provided case management services for the State of Missouri and the State of Tennessee working with both child welfare and adult services.
✓ Program administration	Child Welfare Case Manager LFCS 7/16-Current

EXHIBIT E
EXPERTISE OF KEY PERSONNEL

Title of Position: <u>Program Manager</u> Geographic Region(s): <u>4</u>	
Name of Person:	Heather Wall-Williamson
Educational Degree (s): include college or university, major, and dates	Bellevue University: Bachelor's Degree (1998) University of Nebraska at Omaha: Masters of Counseling Degree (2001)
License(s)/Certification(s), #(s), expiration date(s), if applicable:	Licensed Professional Counselor #2014034069 (Missouri) Certified Reciprocal Alcohol Drug Counselor #8413 (Missouri)
Specialized Training Completed.	Nurturing Parenting Skills, SAFE, CPI, TF-CBT, Trauma Informed Care, CPP, Substance Use
# of years' experience in area of service proposed to provide:	17 years of experience in the field of behavioral health: Case management, Therapy, Program coordination, Substance use treatment, Director
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	Been employed by LFCS since September 22, 2014 at the Regional director of the Columbia office
Describe this person's responsibilities over the past 12 months.	<ul style="list-style-type: none"> • Provide direction, leadership and supervision of day-to-day operations, ensuring high quality program services from clinical staff. • Supervise and support regional office staff. • Operate regional office within approved budgetary guidelines. • Maintain effective relations with community and church constituencies • Maintain an active and effective advisory board
Previous employer(s), positions, and dates	09/2012 – 8/2014 Director of Children Services Behavioral Health Programs at Lutheran Family Services, Omaha, NE 01/2012 – 09/2012 Therapist III (LADC/LMHP) at Lutheran Family Services, Omaha, NE 12/2002-12/2011 at Uta Halee Girls Village/Cooper Village, Omaha, NE <u>Positions Held:</u> <ul style="list-style-type: none"> • Clinical Director/Supervising Practitioner (November, 2011) • Community Programs Manager (May, 2011) • Day Treatment Manager & Staff Licensure Supervision (September, 2009) • Therapist/Case Manager (December, 2002)
Identify specific information about experience in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
✓ Early childhood development	Heather has received training and has worked with youth in early childhood throughout her work experience.

Title of Position: <u>Program Manager</u>	
Geographic Region(s): <u>4</u>	
✓ Family/marital counseling	Heather has conducted family therapy while a therapist for several years. She had a few couples counseling cases during her internship at the University of Nebraska at Omaha.
✓ Social work	Heather has a Master's degree in counseling and has delivered micro and macro social work services for the past 17 years
✓ Case management	As a therapist/Case Manager some of the duties included therapy, coordination, consultation, referrals, etc...
✓ Program administration	Heather began program administration work in 2009 by managing and coordinating the Day Treatment Program. She remained in administration thereafter.

EXHIBIT E
EXPERTISE OF KEY PERSONNEL

Title of Position: <u>Credentialed Case Manager</u>	
Geographic Region(s): <u>4</u>	
Name of Person:	Andrea Pauley
Educational Degree (s): include college or university, major, and dates	Bachelors of Social Work, University of Missouri (Columbia), 8/2001 – 12/2005 Masters of Social Work, Our Lady of the Lake University (San Antonio), 3/2014-12/2015
License(s)/Certification(s), #(s), expiration date(s), if applicable:	
Specialized Training Completed.	Trauma informed service delivery, Nurturing Parenting Program, SAFE Home Study training, Mental Health First Aid, Child Abuse and Neglect
# of years' experience in area of service proposed to provide:	11 years
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	Andrea has been an employee of LFCS for almost 4 years (in May 2016) and did her bachelors practicum with LFCS in 2005
Describe this person's responsibilities over the past 12 months.	Andrea assists with adoptive family services, clients experiencing crisis pregnancies (adoption or parenting) and parents in the Nurturing Program.
Previous employer(s), positions, and dates	Samaritan Center (Jefferson City, MO), 2/2006 – 4/2012, Project Specialist: Coordinator of Holiday program, Free Medical Clinic, and all volunteers. University of MO Psychiatric Unit, summer of 2005, Psychiatric Aide
Identify specific information about experience in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
✓ Early childhood development	Andrea completed her MSW practicum with Parents as Teachers where she learned a lot about child development. Andrea also works with parents of young children in the nurturing and pregnancy program.
✓ Family/marital counseling	Andrea provides crisis pregnancy counseling as to LFCS clients as well as to Nurturing clients.
✓ Social work	Andrea has a Masters in Social Work and has worked delivering micro and macro social work services for 11 years.
✓ Case management	Andrea did case management with medical patients during the 6.5 years at Samaritan Center and then to each client at LFCS for the past 4 years.
✓ Program administration	Andrea oversaw Holiday Program, volunteers and medical clinic at the Samaritan Center.

EXHIBIT E
EXPERTISE OF KEY PERSONNEL

Title of Position: <u>Credentialed Case Manager</u>	
Geographic Region(s): <u>4</u>	
Name of Person:	Golena "Ann" Carlock
Educational Degree (s): include college or university, major, and dates	Masters of Social Work at Missouri University 2004 Bachelor of Social Work at Columbia College 2002
License(s)/Certification(s), #(s), expiration date(s), if applicable:	MSW
Specialized Training Completed.	Child Abuse & Neglect; Nurturing; CPI
# of years' experience in area of service proposed to provide:	10+ years
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	Employee of Columbia office since 7-13-15
Describe this person's responsibilities over the past 12 months.	She performs case management, working with A2A Program and Nurturing. She provides parent education and connecting parentings to resources in the community. She works in a group setting with parents at least once a month. She participates in community outreach and presents on existing programs
Previous employer(s), positions, and dates	2005 – 2015 Children's Service Worker II – Children's Division, Jefferson City (Cole County) MO
Identify specific information about experience in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
✓ Early childhood development	Besides attending numerous training classes over the course of her career, she has worked directly with parents and their children.
✓ Family/marital counseling	Ann has not conducted a traditional counseling session though she works families and couples using case management.
✓ Social work	Worked as a social worker the last 10 years at Children's Division.
✓ Case management	Worked for Children's Division in family-centered services.
✓ Program administration	Case management for last 10 years.

EXHIBIT E
EXPERTISE OF KEY PERSONNEL

Title of Position: <u>Credentialed Case Manager</u>	
Geographic Region(s): <u>4</u>	
Name of Person:	Erin Maynard, MSW, LMSW
Educational Degree (s): include college or university, major, and dates	BS Human Environmental Science-Child Development Southeast Missouri State University 2008 Master of Social Work University of Missouri Columbia 2013
License(s)/Certification(s), #(s), expiration date(s), if applicable:	Licensed Master Social Worker # 2013031035 Exp September 30, 2016
Specialized Training Completed.	EMDR Therapy Level 1 training, Theraplay Level 1 training, Trauma Informed Care, Nurturing Parenting Program, Mental Health First Aid, Strong Parents Stable Children
# of years' experience in area of service proposed to provide:	5 years
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	Erin has been employed with LFCS for 1 year. Hire date 1/20/2015. Erin completed a shared time practicum at LFCS during her Master's program in the spring of 2013.
Describe this person's responsibilities over the past 12 months.	Erin assists with clients experiencing crisis pregnancies by providing pregnancy counseling as well as providing parenting education through the Nurturing Parenting Program. Erin is also a therapist in the Maternal Mental Health program providing mental health therapy services to women and children.
Previous employer(s), positions, and dates	Judevine Autism Center/Touchpoint Autism Services- Autism Specialist/Supported Employment Coordinator October 2008-February 2011 Great Circle- Therapist/Case Manager June 2013- January 2015
Identify specific information about experience in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
✓ Early childhood development	Erin has a Bachelor's degree in Child Development.
✓ Family/marital counseling	Erin provided family therapy services to families during her work at Great Circle. She will also be providing family therapy as part of the Maternal Mental Health program at LFCS.
✓ Social work	Erin graduated with a Master's in Social Work in 2013 and has been providing social work services on the micro and macro level since then for families in need.
✓ Case management	Erin has provided case management services for client by connecting them to community resources and communicating and advocating for the needs of clients and families both at LFCS and Great Circle Residential Treatment Center.
✓ Program administration	Erin has not yet been able to begin program administration duties.

EXHIBIT E
EXPERTISE OF KEY PERSONNEL

Title of Position: <u>Credentialed Case Manager</u>	
Geographic Region(s): <u>4</u>	
Name of Person:	Natalie Fish
Educational Degree (s): include college or university, major, and dates	BSW University of Missouri Columbia 2015 MSW University of Missouri Columbia 2016
License(s)/Certification(s), #(s), expiration date(s), if applicable:	N/A [LMSW intended to be completed prior to 2017]
Specialized Training Completed.	N/A
# of years' experience in area of service proposed to provide:	1
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	Intern from January 2016-May 2016, prior to full-time employment.
Describe this person's responsibilities over the past 12 months.	Worked with clients experiencing crisis pregnancies and provided appropriate counseling, education through nurturing program and case management as necessary.
Previous employer(s), positions, and dates	University of Missouri Health Center-Coordinator for student group in Wellness Dept. (most recent) until Summer 2016
Identify specific information about experience in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
✓ Early childhood development	Acquired education through BSW and MSW program and utilizes curriculum and training for programs through LFCS involving child development.
✓ Family/marital counseling	Counseling through Nurturing Program at LFCS
✓ Social work	Received BSW and MSW at University of Missouri and practices Social Work at macro mezzo and micro levels, respectively.
✓ Case management	Provides case management through LFCS to clients since beginning of internship in 2016 and as full time employee.
✓ Program administration	N/A

EXHIBIT E
EXPERTISE OF KEY PERSONNEL

Title of Position: <u>Credentialed Case Manager</u>	
Geographic Region(s): <u>4</u>	
Name of Person:	Shaileen Thompson
Educational Degree (s): include college or university, major, and dates	Bachelors in Social Work Master's in Social Work
License(s)/Certification(s), #(s), expiration date(s), if applicable:	LMSW license pending. Passed exam on 01/20/16.
Specialized Training Completed.	CPR ,CPI , Nurturing Parenting Skills, Forensic Interviewing,
# of years' experience in area of service proposed to provide:	Shaileen has 16 years' experience in the field of Social Work: Case Management, Program Coordinator, Therapist, Children's Protectives Services, Domestic Violence, College Professor, Parent Teacher Educator, Behavior Mentor and Specialist.
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	She has worked at LFCS since 7/13/2015.
Describe this person's responsibilities over the past 12 months.	She works as a social worker for PMN and Nurturing programs and she also works as a therapist. She provides parent education and connecting parents to resources in the community. She also provides individual, family and couples' counseling. She works in a group setting with parents at least once a month. She attends FST mtgs. She participates in community outreach and presents on existing programs.
Previous employer(s), positions, and dates	Children Protective Services In Michigan- June 2008- Sep 2014 Great Circle- Therapist- Sept 2014- April 2015 LFCS July 2015- Present
Identify specific information about experience in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
✓ Early childhood development	16 Completed assessments for development, attended IEP and making up behavioral plans, demonstrating to parents effective ways to communicate with their children at different ages, discipline at different ages,
✓ Family/marital counseling	7 Conducted sessions for individuals, couples, and family groups
✓ Social work	16 Taught social work classes on research, how to work with families and domestic violence. Worked in a domestic violence shelter providing case management and support groups, mentored children that were at risk, taught parenting classes, worked with families teaching them skills so they could be reunited with their children. Investigated allegations of child abuse and neglect, testified in court, and wrote court reports. Supervised visits with parents and children.

Title of Position: <u>Credentialed Case Manager</u>	
Geographic Region(s): <u>4</u>	
	Assessed child safety and completed safety plans. Worked as a therapist. Worked as a program coordinator. Fundraised for event for Big Brothers and Big Sisters and Catherine Cobb Domestic Violence Shelter, presented on being a mandate reporter. Supervised interns.
✓ Case management	16 Provided Case Management at a domestic violence shelter, two residential programs, Big Brothers Big Sisters, Children's Protectives Services.
✓ Program administration	2 Program Coordinator for Big Brothers Big Sisters, case management, supervised mentors and mentees, supervised staff and interns.

EXHIBIT E
EXPERTISE OF KEY PERSONNEL

Title of Position: <u>Program Manager</u> Geographic Region(s): <u>7</u>	
Name of Person:	Laura Farmer
Educational Degree (s): include college or university, major, and dates	Missouri State University, Bachelor of Social Work degree, May 2004 University of Missouri-Columbia, Master of Social Work degree, May 2007
License(s)/Certification(s), #(s), expiration date(s), if applicable:	Licensed Clinical Social Worker, License Number 2013021078, expiration Sept. 2016. Licensed since 2013.
Specialized Training Completed.	Family Finding, 2009; STARS, 2010; Behavioral Intervention Techniques and Strategies; 2011; Nurturing Families; 2014; SAFE Home Study, 2015; Empowered to Connect; 2015; 3, 5, 7 Grief and Loss, 2015; Trust Based Relational Intervention, 2015. Laura completes at least 30 hours of training every two years to maintain licensure.
# of years' experience in area of service proposed to provide:	10 years
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	Served as the Regional Director in Southwest Missouri for Lutheran Family and Children's Services since 2010.
Describe this person's responsibilities over the past 12 months.	Supervised and directed the child welfare programs provided in Southwest Missouri, including Pregnancy, Parenting and Adoption Services.
Previous employer(s), positions, and dates	AmeriCorps*NCCC, Corps Member, 2004-2005; Missouri Alliance for Children and Families, Care Manager, Senior Care Manager, Care Management Supervisor, Assistant Regional Director, 2007-2010; Lutheran Family & Children's Services, 2010-Present
Identify specific information about experience in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
✓ Early childhood development	Participated in a variety of classes and training in child development including the evidenced-based parenting curriculum, Nurturing Parents (2014). Became a Trust-Based Relational Intervention Practitioner in 2015.
✓ Family/marital counseling	
✓ Social work	Bachelor's and Master's degree in Social Work and is a Licensed Clinical Social Worker. Worked in the field of social work, specifically in child welfare, for 10 years.
✓ Case management	Started her career in specialized case management for children in foster care (2007). Worked in case management for several years, and continues to provide supervision for the pregnancy counseling and case management services.
✓ Program administration	Served as the Regional Director in Southwest Missouri for LFCS since 2010.

EXHIBIT E
EXPERTISE OF KEY PERSONNEL

Title of Position: <u>Credentialed Case Manager</u> Geographic Region(s): <u>7</u>	
Name of Person:	Amanda McVicker
Educational Degree (s): include college or university, major, and dates	Missouri State University, Bachelor of Social Work degree, May 2013
License(s)/Certification(s), #(s), expiration date(s), if applicable:	N/A
Specialized Training Completed.	Nurturing Families; 2015; Empowered to Connect; 2015
# of years' experience in area of service proposed to provide:	2.5 years
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	Served as Social Worker I in Southwest Missouri for Lutheran Family and Children's Services since February 2014.
Describe this person's responsibilities over the past 12 months.	Provided case management support and services to women and families participating in the Pregnancy, Parenting and Adoption Services.
Previous employer(s), positions, and dates	Missouri Alliance for Children and Families, Care Manager Assistant, 2013-2014 Lutheran Family & Children's Services, 2014-Present
Identify specific information about experience in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
✓ Early childhood development	Participated in a variety of classes and training in child development including the evidenced-based parenting curriculum, Nurturing Parents (2015). In addition, received training through Empowered to Connect (2015).
✓ Family/marital counseling	N/A
✓ Social work	Bachelor's degree in Social Work, and she has worked in the field of social work, specifically in child welfare, for 2.5 years.
✓ Case management	Started her career by providing assistance in specialized case management for children in foster care (2013). Since then she has continued to provide case management services to pregnant women and families through Lutheran Family and Children's Services.
✓ Program administration	N/A

EXHIBIT E
EXPERTISE OF KEY PERSONNEL

Title of Position: <u>Credentialed Case Manager</u>	
Geographic Region(s): <u>7</u>	
Name of Person:	Melani Engel
Educational Degree (s): include college or university, major, and dates	Missouri State University, Master of Social Work, 2000 – 2002 Drury University, BA – Psychology, 1995 - 1999
License(s)/Certification(s), #(s), expiration date(s), if applicable:	License Clinical Social Worker, #2004034640, exp. 10/2016, Licensed since 2004
Specialized Training Completed.	Completes at least 30 hours of training every two years to maintain licensure. Notable trainings include: Adoption Learning Partners Trainings – 2005; Infant Adoption Training Initiative Trainer – 2006; Parent Empowerment: Counseling Parents in Positive Child Rearing Practices – 2007; Dr. Brazelton's Touchpoints in Development – 2007; Perinatal Mood Disorders – 2008; Early Childhood Education and Family Strengthening – 2009; Social Work Supervisory Skills (for licensure supervision) - 2009 Grief and Loss in Adoption – 2012; Hague Adoption Training – 2013; Nurturing Families - 2014; SAFE Home Study – 2015
# of years' experience in area of service proposed to provide:	15 years
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	Social Worker with the Pregnancy, Parenting, and Adoption Services program of LFCS for 4 years; Social Worker with CCKC for 6 years also working under the Alternatives to Abortion contract
Describe this person's responsibilities over the past 12 months.	<ul style="list-style-type: none"> • Provided effective counseling, advocacy, and case management to families experiencing crisis during pregnancy, parenting families, and those making adoption plans • Provided post adoption counseling, support group, and events to birth parents • Developed and maintained community networks • Provided consultation and leadership for the Pregnancy, Parenting and Adoption Services program • Provided licensure supervision to licensure candidates • Provided supervision of practicum students • Provided peer mentorship and training
Previous employers, positions, & dates	<ul style="list-style-type: none"> • Lutheran Family and Children's Services, Social Worker III, 2012 - present • Missouri State University, Per Course Instructor – Social Work, 2005 – present • Second Baptist Church, Early Childhood Coordinator, 2011 - 2013 • Catholic Charities of Kansas City, St. Joseph, Family Development Specialist, 2004 - 2010

Title of Position: <u>Credentialed Case Manager</u> Geographic Region(s): <u>7</u>	
	<ul style="list-style-type: none"> • Ozarks Technical Community College, Per Course Instructor - Psychology, 2004 - 2011 • Community Partnership of the Ozarks, Community School Based Social Worker, 2002 - 2005 • Missouri State University Counseling and Testing Center, Graduate Assistant, 2001 - 2002 • Family Mental Health, Targeted Case Manager, 1999 - 2000
Identify specific information about experience in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
✓ Early childhood development	<ul style="list-style-type: none"> ✓ Provided early childhood development education to families; 2004 – current; home visitation, one on one interactions, developmental assessments ✓ Early Childhood care coordinator at a large church; 2011 - 2013; coordinated care according to state standards, provided lessons and support to care staff ✓ Taught Lifespan Development Course; 2005 – 2011; course instructor ✓ Attended multiple child development trainings
✓ Family/marital counseling	<ul style="list-style-type: none"> ✓ Provided counseling under supervision at the MSU Counseling Center; 2001 – 2002; provided counseling to a diverse student population that included marriage and family issues
✓ Social work	<ul style="list-style-type: none"> ✓ Community school based social work; 2002 – 2005; provided a wide range of support and resources to families in school attendance areas. Types of support included: resource and referrals, liaison with families and the school system, student groups, community programming, etc. • Crisis pregnancy counseling and support; 2004 – 2010, 2012 – current; provided effective counseling, advocacy, and case management to families experiencing crisis during pregnancy, parenting families, and those making adoption plans. Provided grief and loss counseling and support services for birth parents.
✓ Case management	<ul style="list-style-type: none"> ✓ Targeted Case Manager for families with children with Axis I disorders and at risk of out of home placement; 1999 – 2000; home visitation, coordination of resources, and family support
✓ Program administration	<ul style="list-style-type: none"> ✓ Practicum Student Program; 2003 – 2005; Created and administered school based social work practicum student program which placed students in multiple schools across the district ✓ Early Childhood care coordinator at a large church; 2011 - 2013; coordinated care according to state standards, provided lessons and support to care staff

EXHIBIT E
EXPERTISE OF KEY PERSONNEL

Title of Position: <u>Director</u> Geographic Region(s): <u>1 & 3</u>	
Name of Person:	Ashley Dooley Wohlgemuth
Educational Degree (s): include college or university, major, and dates	B.S. Business Administration, Kansas State University; 1997 M.B.A., Trinity College Dublin; 2007
License(s)/Certification(s), #(s), expiration date(s), if applicable:	
Specialized Training Completed.	CPR, 1 st aid, Trauma Informed Care, Mental Health First Aid, Diversity, Various YMCA training certifications ranging from working with youth to management to fundraising
# of years' experience in area of service proposed to provide:	15 years
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	Employee of Catholic Charities of Kansas City-St. Joseph; employed for 1.5 years.
Describe this person's responsibilities over the past 12 months.	Program oversight of the following programs: children and family, adoption, financial literacy, mental health, Deaf and disability and nutrition sites. Grant writing, implementation and oversight.
Previous employer(s), positions, and dates	Executive Director, YMCA of Greater Kansas City, Feb 2011-Aug 2014 Executive Director of Camping Services, West Suburban YMCA, Oct 2007-Jan 2011 Executive Director, YMCA of Greater Salt Lake, Nov 2000-July 2006
Identify specific information about experience in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
✓ Early childhood development	As the executive director for the West Suburban YMCA, Ashley oversaw two preschool camps in 2008, 2009, and 2010. Responsibilities included camper recruitment, hiring the camp directors, conducting the all camp staff training, approving weekly camp theme, communicating with parents. As the executive director for the YMCA of Greater Kansas City, she directly managed the "Child Watch" department, which consisted of drop-in babysitting program for children 3 months – 8 years old. Responsibilities included hiring and training staff, ensuring compliance with regulations, handling parent complaints, and daily management.
✓ Family/marital counseling	
✓ Social work	At Catholic Charities, Ashley serves as the director for the agency's child placing services.

Title of Position: <u>Director</u> Geographic Region(s): <u>1 & 3</u>	
✓ Case management	Since 2000, Ashley has served in a leadership role—primarily executive director—within nonprofit organizations. She has written, tracked and reported on grants; implemented new programs; hired, trained and fired staff; provided financial management; set strategic plans; maintained accreditations; built and maintained partnerships; etc.
✓ Program administration	

EXHIBIT E
EXPERTISE OF KEY PERSONNEL

Title of Position: <u>Program Manager</u> Geographic Region(s): <u>1 & 3</u>	
Name of Person:	Jamie Batschke MS. Ed
Educational Degree (s): include college or university, major, and dates	Bachelors in Social Work – Saginaw Valley University- 1983 Master's in Education – St. Vincent College- 2003
License(s)/Certification(s), #(s), expiration date(s), if applicable:	CPR
Specialized Training Completed.	Trauma Informed Care, CPR, HIPPA, Suicide Awareness, Diversity, Staff Supervision and Health and Wellness for Women
# of years experience in area of service proposed to provide:	20 plus years in Human Service and Education
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	Employee of subcontractor for seven months.
Describe this person's responsibilities over the past 12 months.	Staff Supervision for Family Development Specialists and Birthparent Coordinators. Programmatic and grant management for the following programs: Financial Literacy, Child Abuse Prevention, Alternatives to Abortion, Adoption Services
Previous employer(s), positions, and dates	St. Vincent College Prevention Projects- Community Programs Manager- 2000-2005 Alliance for a Healthier Generation- Associate Director of Field Operations - 2006-2012 Boston Public Schools- Director of Implementation- 2013-2015
Identify specific information about experience in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
✓ Early childhood development	St. Vincent College Prevention Projects- Community Programs Manager- 2000-2005- Designed parent education programs.
✓ Family/marital counseling	St. Vincent College Prevention Projects- Community Programs Manager- 2000-2005. Designed family programs and referral networks for public housing residents
✓ Social work	St. Vincent College Prevention Projects- Community Programs Manager- 2000-2005 Sexual Abuse prevention Program- YMCA- facilitator- 1987 Teen Pregnancy Prevention Task Force- Coordinator-1989 Community Programs Manager- St. Vincent College Prevention Projects- 2000-2006 Alliance for a Healthier Generation- Wellness for low-come families- 2006-2012 Catholic Charities of Kansas City- St. Joe- Program management of social service initiatives

Title of Position: <u>Program Manager</u> Geographic Region(s): <u>1 & 3</u>	
✓ Case management	St. Vincent College Prevention Projects- Community Programs Manager- 2000-2005 Catholic Charities supervision on staff- current
✓ Program administration	Teen Pregnancy Prevention Task Force- Coordinator-1989 St. Vincent College Prevention Projects- Community Programs Manager- 2000-2005 Sexual Abuse prevention Program- YMCA- facilitator- 1987 Teen Pregnancy Prevention Task Force- Coordinator-1989 Community Programs Manager- St. Vincent College Prevention Projects- 2000-2006 Alliance for a Healthier Generation- Wellness for low-income families- 2006-2012 Catholic Charities of Kansas City- St. Joe- Program management of social service initiatives

EXHIBIT E
EXPERTISE OF KEY PERSONNEL

<u>Title of Position: Credentialed Case Manager</u>	
<u>Geographic Region(s): 3</u>	
Name of Person:	Angela Zahner Shipley, MSW
Educational Degree (s): include college or university, major, and dates	Bachelors in Social Work – University of Central Missouri Dec 1996 Masters in Social Work – University of Missouri Kansas City May 2011
License(s)/Certification(s), #(s), expiration date(s), if applicable:	Mental Health First Aid, CPR, Safe at Home Registration Assistant
Specialized Training Completed.	NASW Missouri Symposium, Mental Health First Aid, Metropolitan Adoption Council, CPR, HIPPA, Suicide Awareness, Diversity
# of years' experience in area of service proposed to provide:	16 years of experience under the Alternatives to Abortion Grant
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	Employee of subcontractor since 1996.
Describe this person's responsibilities over the past 12 months.	Case Management – intakes, assessments, outreach, ongoing support, advocate, provide information and referrals Adoption – intake, assessment, outreach, ongoing support, advocate, information and referral, attend Court hearings, post adoption support
Previous employer(s), positions, and dates	Senior Center Administrator – Catholic Charities – Dec 1996 to May 1997 Foster Care Case Manager – Catholic Charities – May 1997 to May 1999 Family Development Specialist – Catholic Charities – May 1999 to July 2013 Birthparent Coordinator – Catholic Charities – July 2013 to present
Identify specific information about experience in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
✓ Early childhood development	Case Manager for Catholic Charities working with children and families since 1997
✓ Family/marital counseling	
✓ Social work	Case Manager for Catholic Charities working with children and families since 1997
✓ Case management	Case Manager for Catholic Charities working with children and families since 1997
✓ Program administration	Senior Center administrator for Catholic Charities Dec 1996 to May 1997

EXHIBIT E
EXPERTISE OF KEY PERSONNEL

Title of Position: <u>Credentialed Case Manager</u>	
Geographic Region(s): <u>3</u>	
Name of Person:	Kimberly Barnes
Educational Degree (s): include college or university, major, and dates	Southern University at New Orleans BSW, December 2002
License(s)/Certification(s), #(s), expiration date(s), if applicable:	
Specialized Training Completed.	HIPPA, Suicide Prevention, Diversity, CPR Financial Literacy
# of years experience in area of service proposed to provide:	5
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	Employee at subcontractor for 4 months
Describe this person's responsibilities over the past 12 months.	Case management, goal setting, parent education, intakes and assessments
Previous employer(s), positions, and dates	YMCA Head Start Family Advocate August 2013 – October 2015 Resources for Human Development August 2004 – October 2005 Exhealth, Infinity drug treatment facility August 2000 – May 2001
Identify specific information about experience in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
✓ Early childhood development	Trauma Smart Training, Head Start trainings YMCA Head Start August 2013 – October 2015
✓ Family/marital counseling	Not applicable
✓ Social work	Exhealth, Infinity drug treatment facility August 2000 – 2001 Resources for Human Development August 2004 – October 2005 YMCA August 2013 – October 2015 Catholic Charities October 2015 - present
✓ Case management	Exhealth, Infinity drug treatment facility August 2000 – 2001 Resources for Human Development August 2004–October 2005 YMCA August 2013 – October 2015 Catholic Charities October 2015 - present
✓ Program administration	Not Applicable

EXHIBIT E
EXPERTISE OF KEY PERSONNEL

Title of Position: <u>Credentialed Case Manager</u>	
Geographic Region(s): <u>1</u>	
Name of Person:	Marianne L. Brachman
Educational Degree (s): include college or university, major, and dates	Master's in Social Work – University of North Dakota- 1995 Bachelor's in General Studies – Roosevelt University- 1985 Master's of Science of Management –Cardinal Smith College- 1987
License(s)/Certification(s), #(s), expiration date(s), if applicable:	Licensed Certified Social Worker- North Dakota- expires 2017
Specialized Training Completed.	Gambling Addiction, Mental Health First Aid, , CPR, HIPPA, Suicide Awareness, Diversity, Child Protection
# of years' experience in area of service proposed to provide:	9 years of experience under the Alternatives to Abortion Grant
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	Employee of subcontractor for 9 years
Describe this person's responsibilities over the past 12 months.	Case Management – intakes, assessments, outreach, ongoing support, advocate, provide information and referrals Adoption – intake, assessment, outreach, ongoing support, advocate, information and referral, attend Court hearings, post adoption support
Previous employer(s), positions, and dates	The Village Family Service Agency- 1996-2000- Clinical Social Worker; Bootheel Mental Health Counseling- 2004- Support Worker; Jane Adams Counseling- 1989-1992- Case worker
Identify specific information about experience in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
✓ Early childhood development	Case Manager for Catholic Charities working with children and families since 2006
✓ Family/marital counseling	LCSW- The Village Family Service- 1996-2000
✓ Social work	Case Manager for Catholic Charities working with children and families since 2006; Bootheel Mental Health Counseling- 2004- Support Worker; The Village Family Service Agency- 1996-2000- Clinical Social Worker; Jane Adams Counseling- 1989-1992- Case worker
✓ Case management	Case Manager for Catholic Charities working with children and families since 2006
✓ Program administration	Not Applicable

EXHIBIT E
EXPERTISE OF KEY PERSONNEL

Title of Position: <u>Director</u> Geographic Region(s): <u>6</u>	
Name of Person:	Teresa Hayner
Educational Degree (s): include college or university, major, and dates	MSW; University of Illinois; 1985
License(s)/Certification(s), #(s), expiration date(s), if applicable:	LCSW , State of Missouri; # 005073
Specialized Training Completed.	20 hours of Child welfare specific training annually
# of years' experience in area of service proposed to provide:	30 years of experience in child welfare programming including pregnancy counseling services
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	Employee of Good Shepherd Children and Family Services for 20 years; Good Shepherd is a subcontractor for Lutheran Family And Children Services in the current proposal; previously subcontracted for AFCC in the provision of ATA services since the mid 1990's
Describe this person's responsibilities over the past 12 months.	Senior leadership and supervisory responsibilities for the pregnancy counseling program delivering services under the ATA contract. Also provided senior leadership for the agency Adoption and Foster Care programs.
Previous employer(s), positions, and dates	N/A
Identify specific information about experience in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
✓ Early childhood development	
✓ Family/marital counseling	
✓ Social work	LCSW since 1997
✓ Case management	Direct Service case management 1985 through 1994
✓ Program administration	Program management consistently since 1994.

EXHIBIT E
EXPERTISE OF KEY PERSONNEL

Title of Position: <u>Credentialed Case Manager</u>	
Geographic Region(s): <u>6</u>	
Name of Person:	Amanda Carriker
Educational Degree (s): include college or university, major, and dates	Bachelor's of Social Work (BSW) from Southeast Missouri State University (2011) Master's of Professional Counseling (MA) from Lindenwood University (2016)
License(s)/Certification(s), #(s), expiration date(s), if applicable:	Provisionally Licensed Professional Counseling (PLPC) should be approved by the State of Missouri on August 26, 2016 and post-date to begin July 28, 2016
Specialized Training Completed.	Safe Crisis Management (August 2016); Conflict management (April 2016); Spaulding train the trainer (December 2015); Adoption Subsidy (April 2016); Understanding Autism Spectrum Disorders (September 2015); Oppression: A trauma informed perspective (January 2016); Personal safety (November 2015); National Child Traumatic Stress Network For the Child Welfare Worker (July 2015); Aging Out: Service Provision to Older Youth (September 2015); Interventions with Young Children (June 2015); Rescue and Restore Regional Conference to Combat Human Trafficking (June 2015); Personality Disorders (March 2015); Interventions with Families (December 2015); Safe-Structured Analysis Family Evaluation (December 2015); Disease of Addiction (January 2015); Family Finding Training (February 2016); Becoming Trauma Informed (February 2016); Evidence Based Practices with Children and Adolescents (June 2016); Darkness to Light: Stewards of Children (March 2016); Traumatic Stress: New Mechanisms and Effective Treatments (March 2016)
# of years' experience in area of service proposed to provide:	4.5
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	Employee of Good Shepherd Children and Family Services since May 2014.
Describe this person's responsibilities over the past 12 months.	Position of Family Clinician began on July 1, 2016. In this role individual, group and family counseling is done with homeless clients in the maternity shelter (ages 14-20) as well as to clients in Good Shepherd Treatment Foster Homes. Prior to this position, served in the role of Family Development Specialist recruiting, training, supporting and licensing foster homes, adoptive homes and relative/kinship homes.
Previous employer(s), positions, and dates	Family Development Specialist with Good Shepherd Children and Family Services (May 2014-July 2016) Youth Specialist II with MO Division of Youth Services (February 2013-May 2014) Assistant Team Leader with AmeriCorps NCCC (February 2012-December 2012)

Title of Position: <u>Credentialed Case Manager</u> Geographic Region(s): <u>6</u>	
Identify specific information about experience in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
✓ Early childhood development	Eight month internship with the maternity shelter at Good Shepherd; employee with the maternity shelter as of 7/1/16
✓ Family/marital counseling	MA in professional counseling; eight month professional counseling internship; employed as a family clinician since 7/1/16
✓ Social work	BSW; 5 month internship in a memory care unit; 15 months as a social worker with male juvenile offenders; 2 years working in foster care
✓ Case management	15 months working with male juvenile offenders
✓ Program administration	Assistant team leader of an AmeriCorps program in which developed and managed a team of 11 for 10 months

EXHIBIT E
EXPERTISE OF KEY PERSONNEL

Title of Position: <u>Credentialed Case Manager</u>	
Geographic Region(s): <u>6</u>	
Name of Person:	Angela D. Robinson
Educational Degree (s): include college or university, major, and dates	MSW-St. Louis University-1980-1982 BSW-University of MO-Columbia, MO-1975-1979
License(s)/Certification(s), #(s), expiration date(s), if applicable:	Licensed Clinical Social Worker - September 30, 2016 License number 002062
Specialized Training Completed.	Perinatal Mood and Anxiety Disorders Certificate Training: May 14 and 15, 2015 Nurturing Parenting Skills Curriculum Train the Trainer: Feb 17 – 19, 2016 Oppression: A Trauma Informed Perspective: 1/20/16 Diversity Training; 5/8/2015 Personality Disorder: Assessment and Intervention; 3/20/15 Becoming Trauma Informed-The Impact of Trauma on Children 2/26/16
# of years' experience in area of service proposed to provide:	33 year
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	Employee of Good Shepherd Children and Family Services for 33 years; Good Shepherd is a subcontractor for Lutheran Family And Children Services in the current proposal; previously subcontracted for AFCC in the provision of ATA services since the mid 1990's".
Describe this person's responsibilities over the past 12 months.	Provided professional case management and counseling to expectant parents using a home visitation program model.
Previous employer(s), positions, and dates	Youth Emergency Service 1979-1982
Identify specific information about experience in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
✓ Early childhood development	
✓ Family/marital counseling	
✓ Social work	33 years
✓ Case management	33 years
✓ Program administration	

EXHIBIT E
EXPERTISE OF KEY PERSONNEL

Title of Position: <u>Credentialed Case Manager</u>	
Geographic Region(s): <u>6</u>	
Name of Person:	Colleen Mulligan
Educational Degree (s): include college or university, major, and dates	BSW at University of Central Missouri MSW student at St. Louis University
License(s)/Certification(s), #(s), expiration date(s), if applicable:	N/A
Specialized Training Completed.	Child Welfare Training, Child Welfare Trauma Training, Ethical Issues for Frontline Staff (2/4/15), Protecting God's Children (4/30/15), Using Safety Planning to Assess Risk and Manage Adults at Risk for Suicide (4/24/15), Understanding Two Americas: When Race and Poverty Divide (5/14/15), Understanding Autism Spectrum Disorders (9/16/15), Oppression: A Trauma Informed Perspective (1/20/16).
# of years' experience in area of service proposed to provide:	2 ½ years
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	Employee of Good Shepherd Children and Family Services for 2+ years; Good Shepherd is a subcontractor for Lutheran Family And Children Services in the current proposal
Describe this person's responsibilities over the past 12 months.	Provided professional case management and counseling to expectant parents and birth parents choosing adoption using a home visitation program model.
Previous employer(s), positions, and dates	Previous position at Good Shepherd: Foster Care Specialist
Identify specific information about experience in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
✓ Early childhood development	
✓ Family/marital counseling	
✓ Social work	BSW degree, MSW student, practicum experience with Children's Division, previous position at Good Shepherd in foster care unit.
✓ Case management	Foster care case management 12/13-11/15, expectant parent/adoption case management.
✓ Program administration	

EXHIBIT E
EXPERTISE OF KEY PERSONNEL

Title of Position: <u>Credentialed Case Manager</u>	
Geographic Region(s): <u>6</u>	
Name of Person:	Denise D. Ward
Educational Degree (s): include college or university, major, and dates	Washington University, St. Louis: MSW 2002; University of Missouri in St. Louis: BA Sociology with Emphasis on Social Work 1977.
License(s)/Certification(s), #(s), expiration date(s), if applicable:	LCSW License No. 2006024494, Valid through 9/30/2016.
Specialized Training Completed.	<p>Perinatal Mood and Anxiety Disorders Certificate Training: May 14 and 15, 2015</p> <p>Nurturing Parenting Skills Curriculum Train the Trainer: Feb 17-19, 2016</p> <p>Becoming Trauma Informed: The Impact of Trauma on Children, 2/26/16 (3 hrs)</p> <p>Nurturing Parenting Programs Facilitators Training, 2/17, 2/18, 2/19/16 (17.25 hrs)</p> <p>Oppression: A Trauma Informed Perspective, 1/20/16 (3 hrs)</p> <p>Perinatal Mood and Anxiety Disorders: Components of Care, 5/14, 5/15/15 (14.15 hrs)</p> <p>Diversity Training, 5/8/15 (2.5 hours)</p> <p>Using Safety Training to Assess Risk and Manage Adults at Risk for Suicide, 4/24/15 (3 hrs)</p> <p>Personality Disorders: Assessment and Intervention, 3/20/15 (3 hrs)</p>
# of years' experience in area of service proposed to provide:	37 years in social service profession, 11 ½ years in expectant parent services.
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	Employee of Good Shepherd Children and Family Services for 11 1/2 years; Good Shepherd is a subcontractor for Lutheran Family And Children Services in the current proposal; previously subcontracted for AFCC in the provision of ATA services since the mid 1990's.
Describe this person's responsibilities over the past 12 months.	Provided professional case management and counseling to expectant parents using a home visitation program model.
Previous employer(s), positions, and dates	George Warren Brown School of Social Work at Washington University in St. Louis, Director of CAC (Comorbidity and Addictions Center) 2000-2002; Urban Behavioral Healthcare Institute 1999-2000, Foster Care Case Management Supervisor; YWCA St. Louis County Head Start, Mental Health Specialist 1991; Provident Counseling, Union Electric Customer Assistance Program, Customer Assistance Counselor 1987-1991; Missouri Division of Family Services, Income Maintenance Caseworker and Child Protective Service Worker 1979-1987.
Identify specific information about experience in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience

Title of Position: <u>Credentialed Case Manager</u>	
Geographic Region(s): <u>6</u>	
✓ Early childhood development	
✓ Family/marital counseling	
✓ Social work	From 1979 to present (See previous employer(s), positions above)
✓ Case management	Expectant Parent social worker from April 2004 to present; Foster Care Case Management Supervisor at Urban Behavioral Health Care Institute 1999-2000.
✓ Program administration	Director of Expectant Parent Program at Catholic Services for Children and Youth (now called Good Shepherd Children and Family Services) from April 2004 to November 2008.

EXHIBIT E
EXPERTISE OF KEY PERSONNEL

Title of Position: <u>Credentialed Case Manager</u> Geographic Region(s): <u>6</u>	
Name of Person:	Kathy Fowler MA LPC
Educational Degree (s): include college or university, major, and dates	2005 Masters of Counseling ; Franciscan University of Steubenville Ohio 1999 Bachelors of Arts Education/ Elementary Education
License(s)/Certification(s), #(s), expiration date(s), if applicable:	Licensed Professional Counselor # 2007015599 Expiration Date: 6/30/2017
Specialized Training Completed.	
# of years' experience in area of service proposed to provide:	11 years
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	Worked with Good Shepherd Children and Family Services six years first as Residential and Maternity Therapist and currently as the Director of Treatment Services.
Describe this person's responsibilities over the past 12 months.	Oversaw day to day functioning of transitional living and shelter care for youth ages 12-22 that are pregnant and/or parenting; provided clinical supervision to all clinical team members as well as oversaw the compliance of the shelter in regard to accreditation standards, licensing expectations and standards relating to our federation.
Previous employer(s), positions, and dates	2010 - current : contracted therapist with Catholic Family Services in St. Louis Mo 2006 -2010 Director of Social Services for Manor Care Nursing Home and Skilled Nursing Center in Florissant MO 2005- 2006: Residential Case Manager for Marian Hall and Villa Maria in St. Louis MO
Identify specific information about experience in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
✓ Early childhood development	1999- 2004: Elementary School Teacher for Sts. Joachim and Ann Catholic School in St. Charles Mo.; undergraduate degree in Elementary Education with specific classes in early childhood development.
✓ Family/marital counseling	Variety of therapeutic experience starting in 2004 when she interned in an Adolescent Psychiatric Acute Hospital. Provided individual, group and family therapy under the supervision of a Licensed Professional Counselor. Provided individual, group and family therapy for 10 years. Provided therapy to children, adolescents, adults and older adults in end of life comfort care.
✓ Social work	2006- 2009 Director of Social Services at a skilled Nursing Center in Florissant Mo. Responsible for patient advocacy as well as coordinating services for senior patients and their families.

Title of Position: <u>Credentialed Case Manager</u>	
Geographic Region(s): <u>6</u>	
✓ Case management	2005 Case Management experience working with children in the Child Welfare System in St. Louis Mo. At the skilled nursing center provided a number of case management services to patients and their families.
✓ Program administration	2010 –current: Director of Treatment Services at Good Shepherd Children and Family Services. Responsible for development and implementation of an annual budget, grant and contract proposals and implementation of a parenting and pregnancy teen program. Supervision of staff of approximately 50 and maintains accreditation and licensing standards within the shelter/transitional living program.

EXHIBIT E
EXPERTISE OF KEY PERSONNEL

Title of Position: <u>Credentialed Case Manager</u> Geographic Region(s): <u>6</u>	
Name of Person:	Sarah Miller
Educational Degree (s): include college or university, major, and dates	Master of Social Work Saint Louis University Dec. 2012 Bachelor of Social Work University of Central Missouri May 2010
License(s)/Certification(s), #(s), expiration date(s), if applicable:	Licensed Master Social Worker License #: 2014032121 Valid through Sept. 30, 2017
Specialized Training Completed.	20+ hours of child welfare training annually
# of years' experience in area of service proposed to provide:	3 months providing expectant parent services 3+ years providing foster care services
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	Employee of Good Shepherd Children and Family Services for 3+ years.
Describe this person's responsibilities over the past 12 months.	Provided professional case management and counseling to expectant parents enrolled in the expectant parent program. Provided case management services to children in alternative care and their families in the foster care program.
Previous employer(s), positions, and dates	Benchmark Healthcare of St. Charles, Social Service Director, 2012-2013 Cardinal Glennon Children's Medical Center, Master of Social Work Practicum Student, 2012 Bethesda Dilworth, Master of Social Work Practicum Student, 2012 Behavior Intervention Services, QDDP and Direct Support Staff, 2010-2012
Identify specific information about experience in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
✓ Early childhood development	
✓ Family/marital counseling	
✓ Social work	BSW and LMSW degrees, previous positions at Good Shepherd in foster care unit and as a social service director in a nursing home, previous practicum experience in a children's hospital and nursing home
✓ Case management	Foster care case management 04/2013-05/16, expectant parent outreach worker
✓ Program administration	

EXHIBIT E
EXPERTISE OF KEY PERSONNEL

Title of Position: <u>Director</u> Geographic Region(s): <u>6 & 9</u>	
Name of Person:	LaVon Hulin
Educational Degree (s): include college or university, major, and dates	MSW, The Southern Baptist Theological Seminary, 1988-1991
License(s)/Certification(s), #(s), expiration date(s), if applicable:	LCSW 004472 exp. 9/30/16; ACSW
Specialized Training Completed.	Child Welfare Trauma Training, May 13-14, 2013 The 3-5-7 Model, June 12-13, 2013 Mental Health First Aid, December 18, 2013
# of years' experience in area of service proposed to provide:	24 years
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	Employee of MBCH Children and Family Ministries 18 yrs. Subcontractor of vendor- Partners in the Pregnancy Maintenance Network since the late 1990's.
Describe this person's responsibilities over the past 12 months.	Oversight of pregnancy services in Southeast MO and St. Louis region including a maternity home. Oversight of foster care case mgt. and family resource development in Southeast MO and St. Louis region.
Previous employer(s), positions, and dates	MBCH Children and Family Ministries. Program Director. January 2010-Present. Lutheran Family and Children's Services. Foster Care Supervisor, Child Welfare Director. July 2004- Dec 2009. Missouri Baptist Children's Home/MBCH Children and Family Ministries. Social Worker, Supervisor, Residential Director, Program Director. Dec 1991-July 2004. YWCA. Interim House Manager. September 1991- Nov 1991. Liberty House. Case Aide. Feb 1989- May 1991.
Identify specific information about experience in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
✓ Early childhood development	Child Welfare experience and trainings over many years.
✓ Family/marital counseling	This was done more informally through case mgt.
✓ Social work	27 years in the social work field- primarily in the Child Welfare arena. This has been both frontline and in middle management.
✓ Case management	Worked in various programming for 27 years has given a vast array of case mgt. experience with a variety of populations. To name a few- pregnancy, developmentally disabled, residential group care, foster care, family resource development, homeless youth.
✓ Program administration	Oversight of pregnancy services, family resource development, foster care case management, residential, developmentally disabled group home in various combinations since 1992.

EXHIBIT E
EXPERTISE OF KEY PERSONNEL

Title of Position: <u>Program Manager</u>	
Geographic Regions: <u>6 & 9</u>	
Name of Person:	Jennifer Garland
Educational Degree (s): include college or university, major, and dates	Master Degree-Social Work-University of Missouri-Columbia December 2006 Bachelor's Degree—Social Work- Southeast Missouri State University, Cape Girardeau, Missouri May 2003
License(s)/Certification(s), #(s), expiration date(s), if applicable:	Licensed Clinical Social Worker, 2007007218 Expires September 30, 2016
Specialized Training Completed.	Nurturing Parenting Training, Trauma Training,
# of years' experience in area of service proposed to provide:	13 years
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	Employee of MBCH Children and Family Ministries for 6 years. Subcontractor of the vendor.
Describe this person's responsibilities over the past 12 months.	Supervised staff that provided case management to pregnant women and those parenting children birth to one year old. Provided case management to clients during worker transitions. Assist staff with learning more about adoption and alternatives to abortion.
Previous employer(s), positions, and dates	Tender Hearts Child Therapy Center, Therapist, 2006-2010 Missouri Children's Division, Children's Service Worker, 2003-2006; Community Counseling Center, Family Assistance worker 2000-2003
Identify specific information about experience in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
✓ Early childhood development	While providing therapy I received education in play therapy for young children and helped educate parents regarding early childhood development from 2006-2010. The Nurturing Parenting curriculum used with clients currently relies heavily on helping parents understand child development.
✓ Family/marital counseling	Provided marriage counseling to clients from 2006-2010 when married couples presented to the therapy center.
✓ Social work	I have been a degreed social worker for thirteen years and have been working in the field the entire time through the roles described above.
✓ Case management	Case management from 2003-2006 with the Missouri Children's Division and have either supervised or worked in case management in my current job since 2011.
✓ Program administration	Five years of experience supervising the pregnancy services program with MBCH Children and Family Ministries from 2011-2016. Six years of experience managing the Family Resource Development team in Southeast Missouri, through MBCH Children and Family Ministries from 2010-2016.

EXHIBIT E
EXPERTISE OF KEY PERSONNEL

Title of Position: <u>Credentialed Case Manager</u>	
Geographic Region(s): <u>6</u>	
Name of Person:	Aminah Williams
Educational Degree (s): include college or university, major, and dates	BS-PSYCHOLOGY- Lindenwood University-2002 MA-PROFESSIONAL COUNSELING-Lindenwood University-2007
License(s)/Certification(s), #(s), expiration date(s), if applicable:	Currently in process of obtaining provisional licensure
Specialized Training Completed.	Trauma Informed Care, Suicide Prevention
# of years' experience in area of service proposed to provide:	10+ years of experience in Mental Health, Counseling, and Case Management
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	Employee of MBCH Children and Family Ministries for 6 months; subcontractor of the Vendor
Describe this person's responsibilities over the past 12 months.	Provided Case Management for Pregnant Individuals throughout St. Louis, MO and surrounding areas. Provided counseling and connections to community resources to clients in need. Assisted clients with gaining access to community resources, promoted a faith-based model of encouragement to all clients in need. Assisted clients with transportation if/when needed. Assisted clients with parenting skills, communication, locating employment, locating affordable housing and all other facets of <u>gaining self-sufficiency</u> .
Previous employer(s), positions, and dates	DePaul Health Center- Behavioral Medicine-Intake Assessor/Clinician 2007-2009; Emmaus Homes-Support Coordinator-2009-2010; Behavioral Health Response-Crisis Intervention Counselor-2011-2013; Family Facets-Intensive In-Home Specialist-2014-2015
Identify specific information about experience in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
✓ Early childhood development	Counseled children and families (Family Facets)2014-2015 Currently educating pregnant and mothers of young children for the last six months.
✓ Family/marital counseling	Counseled and Assessed individuals needing assistance and support DePaul (2007-2009), BHR (2011-2013), Family Facets (2014-2015)
✓ Social work	Over 10 years of social work experience dealing with families, and involvement in distressed communities.
✓ Case management	Case management of clients and families provided through intensive in-home services at Family Facets (2014-2015). Currently providing case management to pregnant clients and clients with young children.
✓ Program administration	N/A

EXHIBIT E
EXPERTISE OF KEY PERSONNEL

Title of Position: <u>Credentialed Case Manager</u>	
Geographic Region(s): <u>6</u>	
Name of Person:	Dorian Johnson
Educational Degree (s): include college or university, major, and dates	University of Missouri-St. Louis-(BSW) Bachelor of Social Work; St. Louis Community College- (AAS) Human Services
License(s)/Certification(s), #(s), expiration date(s), if applicable:	n/a
Specialized Training Completed.	Mental Health Awareness
# of years' experience in area of service proposed to provide:	7+ years of experience in the field, working with at-risk youth.
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	Employee of MBCH Children and Family Ministries for four months. Subcontractor of the vendor.
Describe this person's responsibilities over the past 12 months.	*Supervisory *case management
Previous employer(s), positions, and dates	Marygrove, Assistant Director of Crisis Care 02/20/2013-09/2015
Identify specific information about experience in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
✓ Early childhood development	I was able to actively secure a position with Ameri Corps, which offered a position in an elementary school setting teaching language and literacy to children of the early childhood age group.
✓ Family/marital counseling	Approximately three years of informal case management and services offered to families enduring a crisis.
✓ Social work	Academic training and direct care experience utilized over the course of seven years.
✓ Case management	Provided nearly six years of case management to at-risk youth that experience homelessness.
✓ Program administration	Held a supervisory position for nearly two years; offered support and guidance to more than 8 staff; held a position as an instructor of "safe crisis management;" trained the entire campus.

EXHIBIT E
EXPERTISE OF KEY PERSONNEL

Title of Position: <u>Credentialed Case Manager</u>	
Geographic Region(s): <u>9</u>	
Name of Person:	Sarah Bailey
Educational Degree (s): include college or university, major, and dates	Three Rivers Community College-AA Psychology Southeast Missouri State University-BS in Psychology University of Missouri-Columbia-Masters in Social Work
License(s)/Certification(s), #(s), expiration date(s), if applicable:	Licensed Missouri Social Worker 2012027539 9/30/17
Specialized Training Completed.	Trauma training
# of years' experience in area of service proposed to provide:	Eleven years
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	Employee of MBCH Children and Family Ministries for four years. Subcontractor of vendor.
Describe this person's responsibilities over the past 12 months.	Assessed families, walk through of homes, completed home studies, provided services to pregnant women, parenting classes and education to pregnant women.
Previous employer(s), positions, and dates	Bootheel Counseling Services May 2004-August 2004 Targeted Case Manager; Missouri Children's Division August 2004-February 2011 Children's Service Worker II and Children Services Supervisor; Preferred Hospice February 2011-December 2015 social worker; MBCH Children and Family Ministries August 2012-present Family Resource Development Specialist; MBCH Children and Family Ministries January 2016-present Pregnancy Services Specialist.
Identify specific information about experience in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
✓ Early childhood development	Children's service worker and targeted case management working with preschool age children. Received several trainings during that time.
✓ Family/marital counseling	Children's service worker-trainings regarding therapy
✓ Social work	My entire career has been in social work.
✓ Case management	My entire career has been as a social worker and a case manager
✓ Program administration	My career at Preferred Hospice worked in developing a program for veterans.

EXHIBIT E
EXPERTISE OF KEY PERSONNEL

Title of Position: <u>Credentialed Case Manager</u>	
Geographic Region(s): <u>9</u>	
Name of Person:	Valerie Sisson
Educational Degree (s): include college or university, major, and dates	Master of Social Work University of Missouri, Columbia graduated December 2009
License(s)/Certification(s), #(s), expiration date(s), if applicable:	N/A
Specialized Training Completed.	Nurturing Parenting, Childhood Trauma, Worked for Children's Division for six years
# of years' experience in area of service proposed to provide:	16 years
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	Employee of MBCH Children and Family Ministries for 5 years Subcontractor of the vendor
Describe this person's responsibilities over the past 12 months.	Worked with pregnant woman to education them regarding healthy pregnancy, child development, discipline, nurturing, and prevention of child abuse and neglect.
Previous employer(s), positions, and dates	Stoddard County Children's Division November 2004 to May 2010, Counseling Concepts July 2001 to July 2004, Community Counseling Center Intensive In-home Services November 2001-January 2003, St. Francis County Children's Division June 2000 to November 2001
Identify specific information about experience in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
✓ Early childhood development	Worked with children and families since graduating from college in May 2000. Specialized in child abuse and neglect and educating families on child development and identifying developmental needs and delays.
✓ Family/marital counseling	While working for Community Counseling Center I worked with families on establishing a stable home including stable relationships. Educate families regarding the importance of a stable environment and domestic violence.
✓ Social work	Social worker since May 2000 and have maintained employment as a social worker since graduating from Southeast Missouri State University with my bachelor in social work degree.
✓ Case management	Throughout my career I have maintained employment as a case manager including my work for the Children's Division, Counseling Concepts, and Community Counseling Center.
✓ Program administration	N/A

Proposed Method of Performance

EXHIBIT F**METHOD OF PERFORMANCE**

The vendor should present a written plan for performing the requirements specified in this Request for Proposal. In presenting such information, the vendor should specifically address each of the following issues:

1. For each geographic region proposed, identify the service location as well as any satellite locations. Describe the geographic proximity of the services being proposed to the majority of clients to be served. Describe how women initially access services and locate the service location/satellite location.

GEOGRAPHIC REGION 1	
Identify the service location:	700 ½ Olive St; St Joseph, MO 64501
Identify the satellite location(s)	114 E. South Hills Drive #18; Maryville, MO 64468
Describe the geographic proximity of the services being proposed to the majority of the clients served.	
Most women reside within Buchanan County and mainly within the city limits of St Joseph, MO. A small percentage of the women reside in the rural communities in Nodaway, Andrew, Livingston and Medina Counties.	
Describe how women initially access service and locate the service location/satellite location.	
Most clients hear about the program through word of mouth or are referred through a social worker at another agency. The pregnant women call or come by the St Joseph office to schedule an intake appointment. If they travel to the office, they typically drive their car, borrow a vehicle to drive or ride with a friend to get to the first appointment. Subsequent appointments may be held at the office or in the community.	

GEOGRAPHIC REGION 3	
Identify the service location:	850 Main Street; Kansas City, MO 64105
Identify the satellite location(s)	N/A
Describe the geographic proximity of the services being proposed to the majority of the clients served.	
Most women reside within the Kansas City metro area within Jackson County. A small percentage of the women reside in the suburbs and surrounding counties including Clay, Platte and Cass.	
Describe how women initially access service and locate the service location/satellite location.	
Most clients hear about the program through word of mouth or are referred through a social worker at another agency. They call to schedule an intake appointment or they come in the welcome center for assistance and are referred internally to the program. For women travelling to Catholic Charities, approximately half ride public transportation and half ride with a friend to get to the first appointment. Subsequent appointments are primarily held at the office, but occasionally are held in the community.	

GEOGRAPHIC REGION 4	
Identify the service location:	307 Locust Street, Columbia, MO 65201
Identify the satellite location(s)	803 Swifts Highway, Jefferson City, MO 65109
Describe the geographic proximity of the services being proposed to the majority of the clients served. Most women reside in Boone County in the city limits of Columbia, Missouri, where there is an LFCS office. Women also live in the surrounding counties of Cole, Callaway and Cooper.	
Describe how women initially access service and locate the service location/satellite location. Most clients hear about the program through word of mouth or are referred through a social worker at another agency. The majority of referrals come from the County Health Department in Columbia, Missouri. Women are provided with the phone number to LFCS and call to schedule an appointment by phone. Women can also send an email through the website for LFCS and receive a response from a Case Manager through email. The Case Manager will assist the potential clients with directions to the regional office and provide assistance with transportation or by meeting in the client's home, if needed.	

GEOGRAPHIC REGION 6	
Identify the service location:	9666 Olive Boulevard, Suite 400, St. Louis, MO 63132
Identify the satellite location(s)	15 South Oak, Union, MO, 63084 3670 West Clay Street, St. Charles, MO 63301 10734 Hwy 21, Hillsboro, MO 63050
Describe the geographic proximity of the services being proposed to the majority of the clients served. The majority of clients live in the St. Louis Metropolitan Area where Lutheran Family and Children's Services' has an office location, as well as two subcontractors, Missouri Baptist Children's Home and Good Shepherd. Services are also offered out of PMN provider offices located in the more rural counties of Franklin and Jefferson and in the suburban area of St. Charles County.	
Describe how women initially access service and locate the service location/satellite location. Most clients hear about the program through word of mouth or are referred through a social worker at another agency. Referrals come from a number of different programs, including Birthright, Federally Qualified Health Care Centers, and school social workers. Women are provided with the phone number to LFCS, Good Shepherd or MBCH and call to schedule an appointment by phone. Women can also send an email through the website for LFCS and receive a response from a Case Manager through email. The Case Manager will assist the potential clients with directions to the regional office and provide assistance with transportation or by meeting in the client's home, if needed.	

GEOGRAPHIC REGION 7	
Identify the service location:	2130 N. Glenstone Avenue, Springfield, MO 65803
Identify the satellite location(s)	N/A
Describe the geographic proximity of the services being proposed to the majority of the clients served. The majority of clients live in Greene County, which includes Springfield, Missouri, where there is an LFCS office. Clients also live in Christian County and the rural counties of Webster, Stone and Bollinger.	
Describe how women initially access service and locate the service location/satellite location. Most clients hear about the program through word of mouth or are referred through a social worker at another agency. Referrals come from a number of different programs, with the majority coming from The Doula Foundation, Greene County Health Department and the local WIC office. Women are provided with the phone number to LFCS and call to schedule an appointment by phone. Women can also send an email through the website for LFCS and receive a response from a Case Manager through email. The Case Manager will assist the potential clients with directions to the regional office and provide assistance with transportation or by meeting in the client's home, if needed.	

GEOGRAPHIC REGION 2	
Identify the service location:	3178 Blattner Drive, Cape Girardeau, MO 63703
Identify the satellite location(s)	MBCH Case Managers work out of their individual homes in the following cities: Bell City, MO, Bloomfield, MO, Leopold, MO
Describe the geographic proximity of the services being proposed to the majority of the clients served. The majority of clients served by LFCS live in Cape Girardeau County, where there is an LFCS office. The majority of clients served by MBCH live in Stoddard County, where MBCH Case Managers reside. Clients also live in the surrounding rural counties of Scott, Bollinger and New Madrid.	
Describe how women initially access service and locate the service location/satellite location. Most clients hear about the program through word of mouth or are referred through a social worker at another agency. Referrals come from a number of different programs, including Birthright, County Health Department and Children's Division and Building Blocks. Women are provided with the phone number to LFCS and call to schedule an appointment by phone. Women can also send an email through the website for LFCS and receive a response from a Case Manager through email. The Case Manager will assist the potential clients with directions to the regional office and provide assistance with transportation or by meeting in the client's home, if needed.	

2. For each geographic region proposed, describe the demographic profile of the at-risk population to be served. Describe outreach strategies for reaching the targeted at-risk population(s), including strategies for addressing the cultural diversity of targeted clients.

GEOGRAPHIC REGION 1 <i>(Identify the geographic region. If proposing multiple geographic regions, copy and complete this table for each geographic region proposed.)</i>
Describe the demographic profile of the at-risk population to be served. Catholic Charities intends to serve a similar at-risk population as the agency has in the past through this program. This includes pregnant, low income (less than 185% of poverty) Missouri residents. Their race/ethnic backgrounds have been 78% white, 20% African American, 6% Hispanic and the remaining percentage are multi-racial or other. The women are overwhelmingly single and have an average household size of four. In regards to age, 5% are 19 or younger, 77% are in their 20s and 18% are in their 30s.
Describe outreach strategies for reaching the targeted population. Catholic Charities staff do community outreach year round, including talking with social workers and distributing fliers at various social service agencies including Mosaic Life Care- Women's Health, Birthright, St. Joseph PRC, Health Department, WIC, and The Children's Division. The agency is also active in Safe Kids, Youth Alliance, the Open Door Food Kitchen and Community Services. In addition, staff participate in all community health and parenting fairs, plus they distribute fliers at university health clinics, grocery stores, laundry mats and parishes in the area. Finally, clients coming to Catholic Charities' welcome center for emergency assistance who meet the eligibility are provided information on the program and benefits of enrollment. Catholic Charities partners with the University of Missouri Cooperative Extension to meet the needs of the culturally diverse groups served in the region and participates in the Bi-National Health Fair, an event promoted to Hispanics.

GEOGRAPHIC REGION 3

(Identify the geographic region. If proposing multiple geographic regions, copy and complete this table for each geographic region proposed.)

Describe the demographic profile of the at-risk population to be served.

Catholic Charities intends to serve a similar at-risk population as the agency has in the past through this program. This includes pregnant, low income (less than 185% of poverty) Missouri residents. Their race/ethnic backgrounds have been 75% African American, 11% white, 11% Hispanic and the remaining percentage are multi-racial, American Indian, Native Hawaiian or Asian. The women are overwhelmingly single with a median household size of four. In regards to age, 2% are 19 or younger, 65% are in their 20s, 28% are in their 30s, and 5% are in their 40s.

Describe outreach strategies for reaching the targeted population.

Catholic Charities staff participate in community outreach year round, including talking with social workers and distributing fliers at various social service agencies that serve diverse and underserved populations, including schools in low-income neighborhoods, public housing units to other community organizations where families are active. The staff try to make a personal connection with one or more staff members at key social service agencies. These organizations include The Children's Division, Operation Breakthrough, ReDiscover, Birthright, Headstart, Medicaid referrals, WIC, Community Linc, Hawthorn Apartments, amongst others. In addition, Catholic Charities promotes this program through its website, social media, quarterly "Hope Matters" newsletter and participating in the citywide Child Abuse Prevention Month activities. Finally, clients coming to Catholic Charities' welcome center for emergency assistance who meet the eligibility are provided information on the program and benefits of enrollment.

GEOGRAPHIC REGION 4

(Identify the geographic region. If proposing multiple geographic regions, copy and complete this table for each geographic region proposed.)

Describe the demographic profile of the at-risk population to be served.

Lutheran Family and Children's Services intends to serve a similar at-risk population as the agency has in the past through this program. This includes pregnant, low income (less than 185% of poverty) Missouri residents. Their race/ethnic background have been 62% African American, 5% Biracial, 28 % Caucasian, 2% Hispanic and 4% other racial or ethnic backgrounds. The women are overwhelmingly single. In regards to age, 14% are 19 or younger, 52% are in their 20s and 34% are in their 30s.

Describe outreach strategies for reaching the targeted population.

Lutheran Family and Children's Services staff participates in community outreach year round, including talking with social workers and distributing fliers at various social service agencies that serve diverse and underserved populations, including the county health department, schools in low-income neighborhoods, public housing units and other community organizations where families are active. The staff tries to make a personal connection with staff members at key social service agencies. These organizations include The Children's Division, Parents as Teachers, the County Health Department, and WIC office, amongst others. In addition, LFCS promotes this program through its website and social media. LFCS Case Managers in Region 4 mirror the client demographics in the community, which assists in meeting the needs of the culturally diverse clientele in the region.

GEOGRAPHIC REGION 6

(Identify the geographic region. If proposing multiple geographic regions, copy and complete this table for each geographic region proposed.)

Describe the demographic profile of the at-risk population to be served.

Lutheran Family and Children's Services, Missouri Baptist Children's Home and Good Shepherd Child and Family Services each intend to serve a similar at-risk population as they have in Region 6 in the past through this program. This includes pregnant, low income (less than 185% of poverty) Missouri residents. Their race/ethnic background has been 80% African American, 17 % Caucasian, 3% Asian or other racial or ethnic backgrounds. The women are overwhelmingly single. In regards to age, 25% are 19 or younger, 37% are in their 20s and 34% are in their 30s and 4% are in their 40s.

Describe outreach strategies for reaching the targeted population.

Lutheran Family and Children's Services, Missouri Baptist Children's Home and Good Shepherd Child and Family Services staff participate in community outreach year round, including talking with social workers and distributing fliers at various social service agencies that serve diverse and underserved populations, including Federally Qualified Health Centers, area public high schools, County Health Departments and other community organizations where families are active. The staff working in the ATA program tries to make a personal connection with one or more staff members at key social service agencies. These organizations include The Children's Division, Birthright, Head Start, Federally Qualified Health Centers, and WIC offices, amongst others. In addition, agencies in Region 6 promote this program through its website and social media. Case Managers in Region 6 mirror the client demographics in the community, which assists in meeting the needs of the culturally diverse clientele in the region.

GEOGRAPHIC REGION 7

(Identify the geographic region. If proposing multiple geographic regions, copy and complete this table for each geographic region proposed.)

Describe the demographic profile of the at-risk population to be served.

Lutheran Family and Children's Services intends to serve a similar at-risk population as the agency has in the past through this program. This includes pregnant, low income (less than 185% of poverty) Missouri residents. This includes pregnant, low income (less than 185% of poverty) Missouri residents. Their race/ethnic background have been 20% African American, 4% Biracial, 72 % Caucasian, 3% Asian and 1% other racial or ethnic backgrounds. The women are overwhelmingly single. In regards to age, 17% are 19 or younger, 37% are in their 20s and 45% are in their 30s.

Describe outreach strategies for reaching the targeted population.

Lutheran Family and Children's Services staff participate in community outreach year round, including talking with social workers and distributing fliers at various social service agencies that serve diverse and underserved populations, including shelters, day care centers other community organizations where families are active. The staff try to make a personal connection with staff members at key social service agencies in addition to distributing flyers. These organizations include The Children's Division, Operation Breakthrough, ReDiscover, Birthright, Headstart, Medicaid referrals, WIC, Community Linc, Hawthorn Apartments, amongst others. In addition, the program is promoted through its website and social media.

GEOGRAPHIC REGION 9

(Identify the geographic region. If proposing multiple geographic regions, copy and complete this table for each geographic region proposed.)

Describe the demographic profile of the at-risk population to be served.

Lutheran Family and Children's Services intends to serve a similar at-risk population as the agency has in the past through this program. This includes pregnant, low income (less than 185% of poverty) Missouri residents. Their race/ethnic background have been 26% African American, 8% Biracial, 55% Caucasian, and 11% other racial or ethnic backgrounds. The women are overwhelmingly single. In regards to age, 17% are 19 or younger, 37% are in their 20s and 45% are in their 30s.

Describe outreach strategies for reaching the targeted population.

Lutheran Family and Children's Services staff participate in community outreach year round, including talking with social workers and distributing fliers at various social service agencies that serve diverse and underserved populations, including shelters, day care centers other community organizations where families are active. The staff try to make a personal connection with staff members at key social service agencies in addition to distributing flyers. These organizations include Cape County Health Department, Head Start, Safe House for Women and Missouri Bootheel Regional Consortium, amongst others. In addition, the program is promoted through its website and social media.

3. For each geographic region proposed, describe the marketing of services.

Each subcontracting agency markets Alternative to Abortion services as part of general operations, marketing services across the geographic regions proposed (1, 3, 4, 6, 7, and 9). Primary marketing tools used in the community where services are provided include brochures, flyers, and pull off tabs created to raise awareness of the services available to pregnant women. Current brochures describe the program, who is eligible, and how to access services. Each subcontractor's website has information on their services for pregnant and parenting women. Social media messaging is also used to share services through twitter feeds and Facebook postings. The contractor, LFCS, has also participated in radio interviews and utilized billboards in the past to market services to reach out to the population served through the Alternatives to Abortion program. Earlier in the year staff and former clients participated in an outreach video for the Alternatives to Abortion program, which has been used to reach out to potential clients throughout the State. Resource fairs for professionals and community members are also attended to market the program to pregnant women and providers. Program Managers and Case Managers in each region are a part of ongoing collaborative efforts with other social service agencies. Collaborative efforts by reach include:

Region 1: Ecumenical Community Coalition

Region 3: Metropolitan Adoption Council, Missouri Child Health Coalition, National Association of Social Workers Annual Symposium

Region 4: Putting Kids First Coalition, NET-Early Childhood Network meetings and Pregnancy Support and Home Visiting Advisory Board

Region 6: Maternal Child and Family Health Coalition, St. Charles Community Council and Jefferson County Resource Network

Region 7: Pregnancy Coalition, Poverty Collaborative and the Child Abuse and Neglect Collaborative

Region 9: Children's Coalition, Caring Council and PIN (Pemiscot County Initiative Network)

4. For each geographic region proposed, identify the site where the Initial Client Intake Assessment will be conducted. Describe how client eligibility will be determined.

GEOGRAPHIC REGION 1 (Identify the geographic region. If proposing multiple geographic regions, copy and complete this table for each geographic region proposed.)	
Identify the site where the Initial Client Intake Assessment will be conducted:	Initial client intake and assessment will occur at the Catholic Charities office in St. Joseph, satellite office in Marysville, or at Mosaic Life Care, except under dire circumstances where the client is not able to get to the office. For example, if a client would be on bedrest or lives outside of the area where there is public transportation, then the intake and assessment could occur offsite.
Describe how client eligibility will be determined. When a woman is pregnant and contacts Catholic Charities for assistance, she is prescreened and asked the following questions: 1) Are you pregnant? 2) Do you live in Missouri? 3) What is your monthly income? and 4) Do you have a case manager elsewhere? or What other social service agencies are you working with? Then staff will dive deeper to determine if a client is receiving Alternatives to Abortion services elsewhere and will contact the other agency if in doubt. The client will be asked to sign a release of information form before contact is made with the other agency.	

If the client meets all eligibility, she is either immediately assigned a case manager or put on the wait list for when a case manager has an opening. The case manager will schedule an appointment with her for the intake and assessment. When an appointment is made, the client will be informed to bring proper documentation to prove their pregnancy, residency, and income. The following forms of documentation are can be accepted:

- Proof of pregnancy from a medical provider or another social service agency
- MO government issued ID
- Copy of a lease
- Homeless letter from a Missouri agency
- Utility bill
- Pay checks stubs
- Letter, email or fax from her employer
- Social Security benefits statement
- SNAP benefits statements or award letter

At the intake and assessment appointment, the documentation is reviewed and copy is placed in the client's file. If she fails to bring all the necessary documentation, the case manager aids her in selecting what forms of documentation may be easiest for her to obtain then schedules a follow-up appointment to collect the documentation. If a woman fails to provide documentation of pregnancy, residency and income that meet the eligibility requirements, she would not be enrolled in the program.

GEOGRAPHIC REGION 3

Identify the site where the Initial Client Intake Assessment will be conducted:

Initial client intake and assessment will occur at the Catholic Charities office in Kansas City, except under dire circumstances where the client is not able to get to the office. For example, if a client would be on bedrest or lives outside of the area where there is public transportation, then the intake and assessment could occur offsite.

Describe how client eligibility will be determined.

When a woman is pregnant and contacts Catholic Charities for assistance, she is prescreened and asked the following questions: 1) Are you pregnant? 2) Do you live in Missouri? 3) What is your monthly income? and 4) Do you have a case manager elsewhere? or What other social service agencies are you working with? Then staff will dive deeper to determine if a client is receiving Alternatives to Abortion services elsewhere and will contact the other agency if in doubt. The client will be asked to sign a release of information form before contact is made with the other agency.

If the client meets all eligibility, she is either immediately assigned a case manager or put on the wait list for when a case manager has an opening. The case manager will schedule an appointment with her for the intake and assessment. When an appointment is made, the client will be informed to bring proper documentation to prove their pregnancy, residency, and income. The following forms of documentation can be accepted:

- Proof of pregnancy from a medical provider or another social service agency
- MO government issued ID
- Copy of a lease
- Homeless letter from a Missouri agency
- Utility bill
- Pay checks stubs
- Letter, email or fax from her employer
- Social Security benefits statement
- SNAP benefits statements or award letter

At the intake and assessment appointment, the documentation is reviewed and copy is placed in the client's file. If she fails to bring all the necessary documentation, the case manager aids her in selecting what forms of documentation may be easiest for her to obtain then schedules a follow-up appointment to collect the documentation. If a woman fails to provide documentation of pregnancy, residency and income that meet the eligibility requirements, she would not be enrolled in the program.

GEOGRAPHIC REGION 4

(Identify the geographic region. If proposing multiple geographic regions, copy and complete this table for each geographic region proposed.)

Identify the site where the Initial Client Intake Assessment will be conducted:	The Initial Client Intake Assessment will be conducted at the LFCS office in Columbia, Missouri or in the client's home. Clients are able to choose which option is best for them, typically choosing to meet in their homes. Occasionally a client will request to meet at a community location, such as a library. Case Managers will meet with clients in community locations when confidentiality can be maintained.
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Describe how client eligibility will be determined.

When a woman is pregnant and contacts Lutheran Family and Children's Services of Missouri for assistance, she is prescreened and asked the following questions: 1) Are you pregnant? 2) Do you live in Missouri? 3) What is your monthly income? and 4) Do you have a case manager elsewhere? or What other social service agencies are you working with? Then staff will dive deeper to determine if a client is receiving Alternatives to Abortion services elsewhere and will contact the other agency if in doubt. The client will be asked to sign a release of information form before contact is made with the other agency.

If the client meets all eligibility, she is either immediately assigned a case manager or put on the wait list for when a case manager has an opening. The case manager will schedule an appointment with her for the intake and assessment. When an appointment is made, the client will be informed to bring proper documentation to prove their pregnancy, residency, and income. The following forms of documentation can be accepted:

- Proof of pregnancy from a medical provider or another social service agency
- MO government issued ID
- Copy of a lease
- Homeless letter from a Missouri agency
- Utility bill
- Pay checks stubs
- Letter, email or fax from her employer
- Social Security benefits statement
- SNAP benefits statements or award letter

At the intake and assessment appointment, the documentation is reviewed and copy is placed in the client's file. If she fails to bring all the necessary documentation, the case manager aids her in selecting what forms of documentation may be easiest for her to obtain then schedules a follow-up appointment to collect the documentation. If a woman fails to provide documentation of pregnancy, residency and income that meet the eligibility requirements, she would not be enrolled in the program.

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GEOGRAPHIC REGION 6 <i>(Identify the geographic region. If proposing multiple geographic regions, copy and complete this table for each geographic region proposed.)</i>	
Identify the site where the Initial Client Intake Assessment will be conducted:	The Initial Client Intake Assessment will be conducted at the office of the agency the client chooses, which may be LFCS, MBCH, GSCFS or in the client's home. Clients are able to choose which option is best for them, typically choosing to meet in their homes. Occasionally a client will request to meet at a community location, such as a library. Case Managers will meet with clients in community locations when confidentiality can be maintained.
<p>Describe how client eligibility will be determined.</p> <p>When a woman is pregnant and contacts one of the three agencies covering region 6 for assistance, she is prescreened and asked the following questions: 1) Are you pregnant? 2) Do you live in Missouri? 3) What is your monthly income? and 4) Do you have a case manager elsewhere? or What other social service agencies are you working with? Then staff will dive deeper to determine if a client is receiving Alternatives to Abortion services elsewhere and will contact the other agency if in doubt. The client will be asked to sign a release of information form before contact is made with the other agency.</p> <p>If the client meets all eligibility, she is either immediately assigned a case manager or put on the wait list for when a case manager has an opening. The case manager will schedule an appointment with her for the intake and assessment. When an appointment is made, the client will be informed to bring proper documentation to prove their pregnancy, residency, and income. The following forms of documentation can be accepted:</p> <ul style="list-style-type: none"> -Proof of pregnancy from a medical provider or another social service agency -MO government issued ID -Copy of a lease -Homeless letter from a Missouri agency -Utility bill -Pay checks stubs -Letter, email or fax from her employer -Social Security benefits statement -SNAP benefits statements or award letter <p>At the intake and assessment appointment, the documentation is reviewed and copy is placed in the client's file. If she fails to bring all the necessary documentation, the case manager aids her in selecting what forms of documentation may be easiest for her to obtain then schedules a follow-up appointment to collect the documentation. If a woman fails to provide documentation of pregnancy, residency and income that meet the eligibility requirements, she would not be enrolled in the program.</p>	

GEOGRAPHIC REGION 7 <i>(Identify the geographic region. If proposing multiple geographic regions, copy and complete this table for each geographic region proposed.)</i>	
Identify the site where the Initial Client Intake Assessment will be conducted:	The Initial Client Intake Assessment will be conducted at the LFCS office in Springfield, Missouri or in the client's home. Clients are able to choose which option is best for them, typically choosing to meet in their homes. Occasionally a client will request to meet

	at a community location, such as a library. Case Managers will meet with clients in community locations when confidentiality can be maintained.
<p>Describe how client eligibility will be determined.</p> <p>When a woman is pregnant and contacts Lutheran Family and Children's Services of Missouri for assistance, she is prescreened and asked the following questions: 1) Are you pregnant? 2) Do you live in Missouri? 3) What is your monthly income? and 4) Do you have a case manager elsewhere? or What other social service agencies are you working with? Then staff will dive deeper to determine if a client is receiving Alternatives to Abortion services elsewhere and will contact the other agency if in doubt. The client will be asked to sign a release of information form before contact is made with the other agency.</p> <p>If the client meets all eligibility, she is either immediately assigned a case manager or put on the wait list for when a case manager has an opening. The case manager will schedule an appointment with her for the intake and assessment. When an appointment is made, the client will be informed to bring proper documentation to prove their pregnancy, residency, and income. The following forms of documentation can be accepted:</p> <ul style="list-style-type: none"> -Proof of pregnancy from a medical provider or another social service agency -MO government issued ID -Copy of a lease -Homeless letter from a Missouri agency -Utility bill -Pay checks stubs -Letter, email or fax from her employer -Social Security benefits statement -SNAP benefits statements or award letter <p>At the intake and assessment appointment, the documentation is reviewed and copy is placed in the client's file. If she fails to bring all the necessary documentation, the case manager aids her in selecting what forms of documentation may be easiest for her to obtain then schedules a follow-up appointment to collect the documentation. If a woman fails to provide documentation of pregnancy, residency and income that meet the eligibility requirements, she would not be enrolled in the program.</p>	

GEOGRAPHIC REGION 2 <i>(Identify the geographic region. If proposing multiple geographic regions, copy and complete this table for each geographic region proposed.)</i>	
Identify the site where the Initial Client Intake Assessment will be conducted:	<p>The Initial Client Intake Assessment will be conducted at the LFCS office in Cape Girardeau, Missouri or in the client's home. Clients are able to choose which option is best for them, typically choosing to meet in their homes. Occasionally a client will request to meet at a community location, such as a library. Case Managers will meet with clients in community locations when confidentiality can be maintained.</p>
<p>Describe how client eligibility will be determined.</p> <p>When a woman is pregnant and contacts Lutheran Family and Children's Services of Missouri or MBCH for assistance, she is prescreened and asked the following questions: 1) Are you pregnant? 2) Do you live in Missouri? 3) What is your monthly income? and 4) Do you have a case manager elsewhere? or What other social service agencies are you working with? Then staff will dive deeper to determine if a client is</p>	

receiving Alternatives to Abortion services elsewhere and will contact the other agency if in doubt. The client will be asked to sign a release of information form before contact is made with the other agency.

If the client meets all eligibility, she is either immediately assigned a case manager or put on the wait list for when a case manager has an opening. The case manager will schedule an appointment with her for the intake and assessment. When an appointment is made, the client will be informed to bring proper documentation to prove their pregnancy, residency, and income. The following forms of documentation can be accepted:

- Proof of pregnancy from a medical provider or another social service agency
- MO government issued ID
- Copy of a lease
- Homeless letter from a Missouri agency
- Utility bill
- Pay checks stubs
- Letter, email or fax from her employer
- Social Security benefits statement
- SNAP benefits statements or award letter

At the intake and assessment appointment, the documentation is reviewed and copy is placed in the client's file. If she fails to bring all the necessary documentation, the case manager aids her in selecting what forms of documentation may be easiest for her to obtain then schedules a follow-up appointment to collect the documentation. If a woman fails to provide documentation of pregnancy, residency and income that meet the eligibility requirements, she would not be enrolled in the program.

5. For each geographic region proposed, provide a detailed description of the case management process. Identify the hours of service, including emergency coverage outside of business hours and weekends.

In each of the geographic regions proposed (1,3,4,6,7,9), case management is a process through which a professional assists clients to identify their individual strengths and needs in order to build on their strengths and address their needs in a planned, coordinated way. In this case, the need surrounds the pregnancy and the desire of a mother to provide a stable, safe environment for her unborn baby.

The case management process begins with a thorough assessment of the pregnant woman. Information is gathered from the each client regarding housing, health information, pregnancy history, mental health history and information regarding the needs of the client. Each client is assessed for domestic violence in the past and present and resources are offered to anyone who had experienced domestic violence in the past or present. The assessment process is ongoing, with and includes a postpartum depression screening, as well as an income eligibility assessment during the life of the case. The assessment process is dynamic with the service plan being updated as the client's need change. The assessment addresses the needs of a client, which in turn drives the services delivered.

The case management process takes place over a series of visits or sessions with the client. These visits typically take place in the client's home or the professional office but could also occur at a community location like a church or a library at the client's request. Appointments are scheduled around the client's availability. PMN Case Managers are accustomed to working with pregnant women after normal business hours or on the week-ends as the need arises.

Key to the case management process is assisting the client in identifying and connecting to community resources and other natural supports to build self-sufficiency beyond the case management intervention. PMN Case Managers assist the client in connecting to MO HealthNet, WIC, Building Blocks of Missouri, Missouri Community Based Home Visiting programs and Healthy Start Programs. In addition, PMN Case Managers have a wealth of knowledge about other community-based and faith-based services that can assist our clients in securing assistance according to their individual needs.

Clients in each of the regions served by PMN are given the cell phone number of their individual Case Manager to be reached in case of an emergency, which is checked outside of standard business hours. In the event the client's Case Manager is unable to respond to them in the time it will take to meet their need, each sub-contractor has an on-call cell phone where an agency representative can assist the client with her urgent need. There are currently six on-call phone numbers, which provide coverage of the Regions served with one number being used in Region 1 and 3, two numbers for Region 6 and one number for each of the remaining regions of 4, 7 and 9. The contractor, Lutheran Family and Children's Services also utilizes a 24 hour a day, 7 day a week exchange service as a back-up for each of the agencies in the Pregnancy Maintenance Network.

6. **For each geographic region proposed, provide a preliminary list and description of all prenatal and parenting education courses provided by your organization. Indicate the source of the course material taught in each class and identify where each of the required educational components identified in paragraph 2.3.1 c. of the RFP are covered.**

In each of the geographic regions proposed (1,3,4,6,7,9), an essential component of our work involves education and counseling focused on developing and enhancing parenting abilities and assisting both mothers and fathers in being responsible parents. Whenever possible, the participation of the father is encouraged and information is shared with them to aid in establishing and promoting responsible paternity. This work can be done within the case management session or can be done in a more formal group setting. In educating clients in these areas, staff use a variety of informational materials approved and provided by the Missouri Department of Health and Senior Services and other sources such as March of Dimes and the Children's Trust Fund. PMN Case Managers assure that the following mandatory topics (as referenced in the RFP section #2.3.1) are covered, typically in the order listed.

Prenatal Parent Education and Parenting Skills Training Outline

- I. Importance of prenatal care – materials provide information on why it's important to follow through with routine prenatal care, what immunizations are needed during pregnancy and the signs of preterm labor
 - a. *Pregnant? Here are 12 important reasons to get monthly check-ups* – brochure from Noodle Soup
 - b. *Do's and Don'ts Print and Go Guide on Healthy Pregnancy* – handout from U. S. Department of Health and Human Services
 - c. *Immunizations for a Healthy Pregnancy* – brochure from Missouri Department of Health and Senior Services
 - d. *Know the signs of preterm labor* – brochure from March of Dimes
- II. Importance of taking folic acid in the prevention of neural tube defects
 - a. *Take folic acid every day!* – handout from the March of Dimes

- III. Impact of substance abuse on pregnancy
 - a. *Drug Use and Pregnancy Ten things you should know* – brochure from Journeyworks Publishing
- IV. Nutrition and Healthy Eating
 - a. *Healthy Eating and Pregnancy: Ten Tips for Good Nurturing-* brochure from Journeyworks Publishing
- V. Breastfeeding – materials provide an overview of the benefits of breastfeeding to the infant, as well as to the infant-mother's relationship. A handout is also provided with tips to support mothers who chose to breastfeed.
 - a. *20 Great Reasons to Breastfeed Your Baby-* brochure from Childbirth Graphics
 - b. *Breastfeeding for good health* – brochure from Noodle Soup of Weingart Design
- VI. Shaken Baby Syndrome
 - a. *Never shake a baby* – brochure from Children's Trust Fund
- VII. Safe Sleep for infants following the 2011 American Academy of Pediatrics Recommendations
 - a. *What does a safe sleep environment look like?* – handout from Department of Health and Human Services – USA
 - b. *6 simple steps to make your baby's crib safe* – brochure from the Children's Trust Fund
- VIII. Car seat safety-
 - a. *7 out of 10 kids are at risk in a traffic crash!-* brochure from Missouri Department of Transportation
- IX. Immunizations
 - a. *Shots – For your Children's Health* – brochure from Missouri Department of Health and Senior Services
 - b. *Protect your child right from the start* – handout with Missouri's immunization schedule

(Copies of these handouts are provided as an attachment to this bid response in a document titled "Exhibit F. Attachments Only.pdf")

7. **For each geographic region proposed, describe each of the services specified in section 2.3.2 of the RFP. Explain the service delivery system including any referral network and referral plan. Describe the cultural competency of providers.**

Other services (as referenced in RFP point #2.3.2.1) are provided according to the needs identified in the IRNA and documented in the IPCP. PMN Case Managers assess all sources to meet those needs within the community and access ATA contract funds only when no other source can be identified. The PMN Case Manager makes the referral or assists the client in arranging for the basic need to be met. The following is a list of those services and common referrals. Referrals are listed by region.

Prenatal Care

Prenatal care is a priority for every woman in this program. The client, together with the Case Manager, works to identify her needs and resources (e.g. private insurance, Medicaid, private pay, etc.). The Case Manager makes referrals to local prenatal care providers, including doctors, health centers, clinics, and hospitals, for prenatal care only as well as prenatal care and delivery.

Geographic Region 1: Mosaic Life Care Women's Health

Geographic Region 3: Swope Health, Truman and St. Luke's Hospitals

Geographic Region 4: Women's and Children's Hospital, Family Health Center

Geographic Region 6: Mercy JFK Clinic, People's Health Center, St. Louis County Health Department

Geographic Region 7: Jordan Valley, Cox and Mercy Hospitals, Family Medical Care Clinic

Geographic Region 9: Southeast Health, Missouri Delta Medical Center

Medical Care

Health maintenance, prevention, and treatment are provided by a licensed medical provider. Medical care may include maintenance of health, prevention or treatment of illness, and treatment of injury or pregnancy complications for clients, as such services relate to the prevention of abortion.

Geographic Region 1: Mosaic Life Care Women's Health, Northwest Health Services

Geographic Region 3: Swope Health, Truman and Sam Rogers Hospitals

Geographic Region 4: Family Health Care Center, University of Missouri Clinic

Geographic Region 6: John C. Murphy Clinic, People's Health Center, Affinia Health Center

Geographic Region 7: Jordan Valley, Family Medical Care Center, Cox and Mercy Hospitals

Geographic Region 9: Twin Rivers Medical Center, South East Health, St. Francis Medical Center

Mental Health Care

Counseling or treatment to assist the client with management of mental illness, stress, postpartum depression, or other issues affecting her mental/emotional well-being is referred for services when indicated. These services are provided by a licensed or certified professional.

Geographic Region 1: Serenity Counseling Center, Family Guidance, Samaritan Counseling Center

Geographic Region 3: Truman Hospital, Tri-County Mental Health, Center for Behavior Medicine

Geographic Region 4: Maternal Mental Health Program, Family Counseling Center, Lisa Brown, LCSW

Geographic Region 6: Behavioral Health Response, Center Pointe, DePaul Health Center

Geographic Region 7: Burrell, Ozark Counseling Center, Center City Counseling Clinic

Geographic Region 9: Community Counseling Center, Bootheel Counseling

Newborn or Infant Medical Care

Medical care and interventions by a licensed medical provider may be provided to the baby throughout the first year of his or her life.

Geographic Region 1: Mosaic Life Care Hospital/Urgent Care, Social Welfare Board Health Clinic, Lakeside Pediatrics

Geographic Region 3: Swope Health, Truman and St. Luke's Hospitals

Geographic Region 4: Women & Children's Hospital, Family Health Center

Geographic Region 6: John C. Murphy Clinic, People's Health Center, Affinia Health Center

Geographic Region 7: Family Medical Care Clinic, Cox and Mercy Hospitals

Geographic Region 9: Southeast Pediatrics, Cape County Health Department, Cape Physician Associates

Adoption Assistance

PMN agencies provide education, support, and case management services regarding the emotional and legal aspects of adoption. The client may also be referred to an attorney when indicated.

Geographic Region 1: Catholic Charities of Kansas City-St. Joseph, Lutheran Family and Children's Services

Geographic Region 3: Catholic Charities of Kansas City-St. Joseph, Christian Family Services

Geographic Region 4: Lutheran Family and Children's Services, Love Basket

Geographic Region 6: Lutheran Family and Children's Services, Missouri Baptist Children's Home, Good Shepherd

Geographic Region 7: Lutheran Family and Children's Services

Geographic Region 9: Missouri Baptist Children's Home, Lutheran Family and Children's Services

Child Care

The client is assisted with child care arrangements when needed to participate in contract activities or services. A client is referred to the Department of Social Services for child care assistance and then may use either a day care facility or in-home care. Child care providers must meet minimum Children's Division standards, which require a Family Care Safety Registry.

Geographic Region 1: DSS Family Support Division, InterServ Early Care and Education, YWCA, MO/Respite Child Care-Noyes Home

Geographic Region 3: DSS Family Support Division, Head Start, Family Conservancy, Operation Breakthrough

Geographic Region 4: DSS Family Support Division, Child Care Aware

Geographic Region 6: DSS Family Support Division, Child Care Aware, Crisis Nursery

Geographic Region 7: DSS Family Support Division, Child Care Resource and Referral, Child Development Center

Geographic Region 9: DSS Family Support Division, Head Start, Delta Area Economic Opportunity Corporation.

Clothing

Clothing relating to pregnancy, newborn care, and parenting may be supplied.

Geographic Region 1: Grace House, Second Season Thrift Shop, InterServ Cherokee Street Store

Geographic Region 3: Catholic Charities of KC-St. Joseph, Goodwill

Geographic Region 4: The Wardrobe, Salvation Army, Goodwill

Geographic Region 6: Helping Hand Me Downs, Goodwill, Salvation Army

Geographic Region 7: Crosslines, Salvation Army, Grand Oaks Mission, School Clothing Bank

Geographic Region 9: Salvation Army, Goodwill, Love, Inc.

Domestic Abuse Protection

Each client is assessed for violence in her relationships. If a client is threatened or in danger, the Case Manager will make timely and appropriate arrangements to assist the client and her children in assuring their physical and emotional safety is met. Referral to a domestic violence agency for shelter and/or education on protection is made as appropriate.

Geographic Region 1: YWCA Shelter, Legal Aid of Western Missouri

Geographic Region 3: Rose Brooks, Synergy, Hope House

Geographic Region 4: True North, Rainbow House, Jefferson City Rape and Abuse Crisis Services

Geographic Region 6: Raven, ALIVE, Women's Safe House

Geographic Region 7: Harmony House, COPE House

Geographic Region 9: Haven House, Safe House for Women

Drug and Alcohol Testing and Treatment

Each client is assessed for substance use. Drug/alcohol testing and treatment is provided as needed. When a problem is identified through report or through testing, the client is referred to an individual, group, or family program that is appropriately licensed or certified.

Geographic Region 1: Serenity Counseling Center, Addiction Awareness

Geographic Region 3: Truman Hospital, Tri-County

Geographic Region 4: McCambridge Center, Phoenix Program, Valley Hope

Geographic Region 6: Black Alcohol/Drug Service Information Center (BASIC), Crider, Bridgeway, Center Pointe, Harris House

Geographic Region 7: Preferred Family Health, Burrell, Cox Center for Addictions

Geographic Region 9: Family Counseling Center, Bootheel Counseling

Educational Services

Referrals are made to local public school districts and Hi-SET programs for women who have not completed high school. As appropriate, resources for college, vocational and technical training, books, etc. may be provided.

Geographic Region 1: Webster Learning Center for Hi-SET, Missouri Career Center

Geographic Region 3: Independence Adult Education, Kansas City Adult Education, Blue Springs Adult Education

Geographic Region 4: Career Center, Columbia Area Vocational Tech School, Douglass High School Hi-SET program

Geographic Region 6: Women In Charge, Doors to Success, Job Corp

Geographic Region 7: Missouri Job Center, Ozark Technical Community College Adult Education, Missouri State University, Trade Schools

Geographic Region 9: Southeast Missouri State University Hi-SET, Three Rivers Community College, Mineral Area College

Food

Food products or nutritional products relating to pregnancy, newborn care, and parenting may be supplied. Clients are referred to SNAP and WIC programs and provided information about local food pantries when additional resources are needed.

Geographic Region 1: Second Harvest Food Bank, Open Door Food Kitchen, WIC

Geographic Region 3: Catholic Charities Kansas City-St. Joseph, Guadalupe Center, No Boundaries Food Pantry

Geographic Region 4: Salvation Army, Love, Inc., Food Pantry

Geographic Region 6: Jewish FCS Food Pantry, Loaves and Fishes, Hunger Hotline

Geographic Region 7: Crosslines, Schweitzer United Methodist Church food pantry, Grant Oaks Mission

Geographic Region 9: Virgies Place, Inc., Missouri Bootheel Regional Consortium, Southeast Missouri Food Bank

Housing

When needed, the client is assisted in finding appropriate safe housing. Depending on the age and needs of the client and the availability of resources, the following options will be considered: motel/hotel (for emergency situations), group shelter (including domestic violence shelters), transitional living, independent living, placement with a family, foster care, and residential treatment, or assistance with rent, house payments or security deposits.

Geographic Region 1: St. Joseph Housing Authority, HOME Unit, Hillcrest Transitional Housing

Geographic Region 3: United Services, Section 8, Salvation Army

Geographic Region 4: Housing Authority, Columbia Square, Lakewood, Sal. Army Harbor House

Geographic Region 6: Housing Resource Center, Community Action Agency of STLCC, Housing Authority

Geographic Region 7: Affordable Housing Center, One Door, Housing Authority, The Kitchen

Geographic Region 9: Housing Authority, MO Bootheel Regional Consortium, Amen Center

Utilities

As established social services agencies, the subcontractors of this program have a working knowledge of community energy resources, which are provided to clients. Clients are provided with information on the LIHEAP application and referred to the local agency responsible for administering the program.

Geographic Region 1: Catholic Charities Kansas City-St. Joseph, Inter Serv EA program, Community Action Partnership, House of Bread

Geographic Region 3: Catholic Charities Kansas City-St. Joseph, Salvation Army

Geographic Region 4: Central Missouri Community Action, Love, Inc., St. Vincent-DePaul

Geographic Region 6: Community Action Agency of STLCC, Urban League, St. Vincent-DePaul

Geographic Region 7: Ozarks Area Community Action Corp., One Door, Salvation Army

Geographic Region 9: MO Bootheel Regional Consortium, Delta Area Econ. Opp Consortium, Ministerial Alliance

Job Training and Placement

Referrals to established programs or other assistance that facilitate and/or enhance the employability of the client and/or father of the baby are utilized.

Geographic Region 1: Missouri Career Center, Hillyard Tech Center, Good Works, Vocational Rehab, Missouri Western University

Geographic Region 3: Catholic Charities Kansas City-St. Joseph, Metropolitan Lutheran Services, Job Corps Center

Geographic Region 4: Job Corp, Vocational Rehab

Geographic Region 6: Better Family Life, Missouri Career Center, Job Corp

Geographic Region 7: Missouri Job Center, Schweitzer United Methodist Church-Jobs for Life, Temporary Employment Agencies

Geographic Region 9: Manpower, Workforce, United Way

Supplies

Supplies relating to pregnancy, newborn care, and parenting may be provided and may include car seats, Pack 'N Play, etc.. All the women in the program will be assessed for ability to provide a safe sleep environment for her infant as set forth by the 2011 American Academy of Pediatric Guidelines.

Geographic Region 1: St. Joseph Health and Safety Council, St. Joseph Youth Alliance

Geographic Region 3: Birthright, Safety Council

Geographic Region 4: Love, Inc., Voluntary Action Center, Fairview Church

Geographic Region 6: Birthright, Mary Queen of Angels, SIDS Resources

Geographic Region 7: Safe Kids, Newborns in Need, Crosslines

Geographic Region 9: Birthright, Virgies Place, Inc., Salvation Army

Transportation

In order to assist clients to access the other services provided under this program, the clients may be given assistance for transportation, including bus fare, taxicab fare or private transportation (i.e. gift cards for gasoline).

Geographic Region 1: St. Joseph Transit, All-American Taxi, Logisticare, Oats Bus

Geographic Region 3: Medicaid, Kansas City Transit Authority

Geographic Region 4: Voluntary Action Center, MidMo Rides, Central Missouri Community Action

Geographic Region 6: Call-a-ride, Metrolink public transportation

Geographic Region 7: CU Transit Services, Medicaid Transport, Missouri Jobs Center

Geographic Region 9: SEMO Transit Service, Cape Transit Service, Love, Inc., Medicaid Transport

Ultrasound Services

A client receives ultrasound tests as medically indicated, utilizing her own, or program referred resources.

Geographic Region 1: Mosaic Life Care Women's Health

Geographic Region 3: Swope Health and Truman Hospitals, Rachel's House

Geographic Region 4: My Life Clinic, Family Health Center

Geographic Region 6: St. Mary's Health Center, Mercy Hospital, People's Health Center

Geographic Region 7: Jordan Valley, Cox and Mercy Hospitals, Family Medical Care Clinic

Geographic Region 9: Options for Women, Pregnancy Resource Center-Sikeston

Other Services

Other services to assist pregnant women in carrying her unborn child to term or to assist her in caring for her dependent child or placing her child for adoption are provided as appropriate and necessary to insure healthy outcomes for mother and baby. This includes services which are essential to the client but not covered in previously listed definitions. In the past some requests have included birth certificates, exterminator services and car repair. PMN will comply with contract requirements regarding the provision and billing for this category, including pre-approval and information on the other sources of funding that were attempted. None of the funds from this contract will be used to purchase tobacco or alcohol products. No funds will be expended for the purpose of performing, assisting or encouraging abortion, or to directly or indirectly subsidize abortion services.

Cultural Competency

PMN providers employ professional Case Managers who receive regular training on the importance of cultural competency. Case Managers employed by Catholic Charities of Kansas City-St Joseph are required to participate in Cultural Diversity and Valuing Diversity in the Workplace trainings each year. Lutheran Family and Children's Services, Missouri Baptist Children's Home and Good Shepherd Children and Family Services utilize trainings offered in the regions they serve which are centered on cultural competency. Some recent trainings that Case Managers attended were titled Multi Cultural Training, Oppression: A Trauma Informed Perspective and Children's Division Basic Training: Cultural Diversity. Case Managers also provide referrals related to the cultural needs of the clients they serve. For example, a Latino client in Region 6 may be referred to Casa de Salud, a clinic serving recent immigrants in the region or the International Institute, which assists in job placement. Case Managers in each region seek to meet the needs of the clients they serve with culturally appropriate referrals. If clients report any concerns about the cultural competency of outside providers, PMN Case Managers will help address any issues that interfere with full access to services.

- 8. For each geographic region proposed, describe how your proposed program will provide assistance to needy families so that children may be cared for in their own homes or in the homes of relatives.**

In each of the geographic regions proposed (1,3,4,6,7,9), PMN providers focus on meeting the immediate needs of families first so they then can then focus on the future of their families. Many of our clients struggle to think beyond today when experiencing one or more crises, which may include loss of housing, insufficient food, or lack of resources, such as diapers and formula to adequately care for their children. By providing emergency assistance in the form of diapers, formula, rent payments, utility payments, and transportation assistance, parents are able to continue residing at their home without fear of eviction, homelessness or the Children's Division removing their children from the home due to lack of a safe environment and/or proper care for the child(ren).

Each of the agencies in PMN operates a client-centric service model, which allows the agency to provide a continuum of care for clients based on what their needs are and the client's level of involvement in the program. All clients are greeted and a centralized intake is completed in order to determine their level of commitment to their goals and what services will best meet their needs. Social workers work with families to assess their short and long term needs and set goals to build a sustainable model for self-support so they can effectively raise their families without government benefits or other dependencies. Social workers utilize tools and trainings around budgeting, encouraging and supporting their efforts to obtain employment or further their education to help families and utilizing community resources such as food pantries. Clients then work to obtain the goals they set with the ongoing support of the program until the child turns one year of age. It is a priority for our program that families remain intact, safe and healthy, whether that is in their own homes or in the homes of relatives.

Particularly in Regions 1 and 3, if clients are still interested in receiving support after the child's first birthday, they may transfer to another Catholic Charities program not supported through Alternatives to Abortion funding to continue working to accomplish their goals while receiving guidance on their pathway out of poverty and to self-sufficiency. In Regions 4 and 6, clients are able to transfer to the Nurturing Parenting program, a program designed to build protective factors and provide education on a number of topics, such as positive discipline. In Regions 7 and 9, referrals are made to other local agencies with a focus on children over the age of one. Referrals are based on the needs of the child as well as the parents.

- 9. For each geographic region proposed, describe how your proposed program will help to end the dependence of needy parents on government benefits by promoting job preparation, work, and marriage**

In each of the proposed geographic regions proposed (1, 3, 4, 6, 7, 9), the Pregnancy Maintenance Network sees the value and importance of promoting job preparation and work. Finding and maintaining employment is a typical goal of women in the ATA program. The job of the case manager is to help the client identify the type of employment desired and identify any supportive services available to obtain a position. Case Managers assist clients in accessing Career Centers, job training programs. They help eliminate barriers to utilizing these resources by providing transportation assistance and identifying child care options. During monthly meetings with their Case Manager, clients will also discuss any barriers that may arise to obtaining employment, such as finding an overnight daycare after a client's hours change. The Case Manager will assist with resources and explore the options available to the client so they can focus on maintaining employment.

In geographic regions 1 and 3, Catholic Charities goes beyond just promoting job preparation and work. The agency has an entire Workforce Development program to aid clients. It is the philosophy of Catholic Charities that employment is the fastest way out of poverty, and the reliance on public benefits and our goal to help families earn a living wage of at least \$11.50/hour. Clients receive the small group and individual assistance and guidance to help them become completely self-sufficient and meet all their family's needs without the help of public benefits.

Catholic Charities works to ensure individuals and families achieve employment and economic stability and mobility through comprehensive workforce services and programs. Agency services are designed to help some of the most barrier-laden, challenging-to-employ participants to create career pathways, prepare for workforce success, attain/maintain/retain employment, and generate opportunities to increase income.

Catholic Charities' comprehensive workforce development system includes a menu of services. The core services include workshops and one-on-one assistance regarding interview skills, interview attire, and interview etiquette; interview practice; 30-second and 2-minute commercials; workshops and one-on-one assistance relating to good work habits such as promptness, customer service etiquette, suitable hygiene, and attitude; workshops and one-on-one services relating to resume preparation, resume development, and cover letters; communication skills training to assist with peer/supervisor relationships and problem solving; basic technology training as indicated, including basic computer and Microsoft Office, as needed; and basic academic/literacy skills as needed by the individual.

As faith based agencies, the four agencies that encompass the Pregnancy Maintenance Network value marriage and incorporate that value into the work they do with clients. While marriage is discussed and supported, PMN recognizes that some clients have not witnessed or experienced positive examples of marriage. They may not have seen the benefits of the institution, so a starting place is to discuss healthy relationships and what those look like for clients and their family.

10. **For each geographic region proposed, describe how your proposed program will reduce the incidence of future out-of-wedlock pregnancies. Include your program's annual numerical goals for preventing and reducing the incidence of these pregnancies.**

In each of the geographic regions proposed (1,3,4,6,7,9), the Pregnancy Maintenance Network (PMN) focuses most on providing assistance to needy families so that children can stay in their homes and secondarily focuses on ending the dependency on government benefits by offering support and assistance in addressing the barriers to success. Involvement with a PMN agency offers clients access to referrals and financial assistance to counteract the barriers. Clients are provided with information on the benefits of birth spacing and Case Managers follow up with clients regarding the recommendation of the clients' physician regarding future pregnancies. Clients are encouraged to pursue their goals of employment and education, which can also serve to reduce the incidence of these pregnancies through a focus on the future. While preventing and reducing unplanned/out-of-wedlock pregnancies is one goal of the program, PMN currently does not set specific annual numerical goals for preventing and reducing the incidence of these pregnancies.

- 11. For each geographic region proposed, describe how your proposed program will encourage the formation and maintenance of two-parent families.**

In each of the geographic regions proposed (1, 3, 4, 6, 7, 9), relationships are an important component of case management services. Through the initial assessment process, Case Managers learn about the relationship each client has with the father of her baby. If the client and father are no longer in a relationship, co-parenting will be discussed during monthly visits. If the client and father of the baby are in a committed relationship, the Case Manager will focus on engaging the father in services and talking with the couple about how to communicate and handle the stress of being a parent. All clients receive education on healthy relationships, which helps them recognize negative patterns and make better choices in the future.

- 12. Organizational Chart - The vendor should provide an organizational chart showing the staffing and lines of authority for the key personnel to be used. The organizational chart should include (1) The relationship of service personnel to management and support personnel, (2) The names of the personnel and the working titles of each, and (3) Any proposed subcontractors including management, supervisory, and other key personnel.**

- **The organizational chart should outline the team proposed for this project and the relationship of those team members to each other and to the management structure of the vendor's organization.**

Please note that the organizational chart is provided at the end of Exhibit F, page 105.

- 13. Along with a detailed organizational chart, the vendor should describe the following:**

- **How services of the contract will be managed, controlled, and supervised in order to ensure satisfactory contract performance.**

Lutheran Family and Children's Services (LFCS) serves as the contractor, or lead agency, for the ATA contract. LFCS, along with Catholic Charities of Kansas City-St. Joseph, Good Shepherd Children and Family Services and MBCH Children and Family Ministries comprise the Pregnancy Maintenance Network (PMN). The directors from each agency comprise the PMN Leadership Team.

This PMN Leadership Team meets bi-monthly to monitor performance under the ATA contract, including implementation of the contract, spending patterns and the specifics of services provided to our clients. Other duties of the leadership team include practice review, each subcontractor's Performance Quality Improvement and Quality Assurance processes, and the discussion of trends, barriers and successes.

Also during these meetings, as well as at other times throughout the contract, information is shared about lessons learned during the billing review, entry into the data system, and guidelines to ensure that the contract allocation is expended in a controlled and reasonable manner across all agencies.

Since July 2004, LFCS has provided services to the PMN Leadership Team as the management agency. The work at LFCS is accomplished under the supervision of Christine Corcoran, MSW, LCSW. Other members of the management team include Kristen

Setterlund, MSW, LCSW and an administrative assistant. Practice and billing issues, as well as requests for other services are directed to the management agency who also serves as liaison with the fiscal manager and the states contract representative.

The team at the management agency answers questions regarding contract issues, documentation requirements and data base entries. The team ensures the following:

- information entered into the ATA program database is accurate and uniform;
- monthly case file reviews are occurring per the requirements of the state agency and submitted by the deadlines
- submit monthly reports regarding enrollment and the services provided to clients in the ATA program
- submit the monthly award amount, and, finally,
- shares the information with the fiscal agent.

Billing and financial matters are handled in a similarly comprehensive manner. The Vice President of Finance at Lutheran Family and Children's Services will receive the quarterly expenditure reports from the agency subcontractors and compile the results before submitting it to the state agency. He will also be responsible for paying the agency subcontractors, which will be based on the award amount received per region and anticipated monthly expenditures of each agency. Payment from the state is received by direct deposit.

- **Total Personnel Resources - The vendor should provide information that documents the depth of resources to ensure completion of all requirements on time and on target. If the vendor has other ongoing contracts that also require personnel resources, the vendor should document how sufficient resources will be provided to the State of Missouri.**

PMN is uniquely equipped to provide the depth necessary to provide services under this contract. Each of the subcontractors is a multi-program social service agency. There are multiple sites in most situations, with multiple staff members. In addition, our agencies have worked together on this and other contracts for over 20 years. Our staff train together, work together and are able to back each other up should the need arise. The PMN Network is comprised of four directors, six program managers, twenty-six case managers and three staff who provide program and fiscal administration.

14. **Economic Impact to Missouri - The vendor should describe the economic advantages that will be realized as a result of the vendor performing the required services. The vendor should respond to the following:**

- **Provide a description of the proposed services that will be performed and/or the proposed products that will be provided by Missourians and/or Missouri products.**

The Pregnancy Maintenance Network (PMN) was established to provide a coordinated system of case management and supportive services for pregnant and parenting women. This project of PMN serves women across the State of Missouri and offers a variety of social services, made available through this contract. The resources of the four agencies that comprise the Pregnancy Maintenance Network, as well as other health and human service providers throughout the state are utilized in an efficient and effective manner. Each agency employs Missouri staff members and has their facilities physically located in Missouri.

Along with employing Missourians, the majority of products used to deliver and document services are purchased in Missouri. These items include office supplies, vehicles, printing services, computers, and gasoline. When possible, preference is given to materials and products made in Missouri.

- **Provide a description of the economic impact returned to the State of Missouri through tax revenue obligations.**

Local and state taxes are paid by the full time employees that have been hired by the agencies of PMN to implement the ATA contract. Along with employing Missourians, the majority of products used to deliver and document services are purchased in Missouri. These items include office supplies, vehicles, printing services, computers, and gasoline.

- **Provide a description of the company's economic presence within the State of Missouri (e.g., type of facilities: sales offices; sales outlets; divisions; manufacturing; warehouse; other), including Missouri employee statistics.**

Catholic Charities Kansas City- St. Joseph has offices in St. Joseph, Kansas City and Warrensburg, providing over 60 different programs aimed at reducing poverty and strengthening individuals and families. The agency employs 80 employees with annual salaries of \$3,589,828.00. For calendar year 2015, we paid more than 250 Missouri vendors a total of \$2.6 million.

Good Shepherd Children and Family Services is a social service agency that employs 59 staff. GS operates one site located in University City, Missouri and serves an 11 county area surrounding metropolitan St. Louis. In addition, they share a satellite office with St. Louis Partners located in Hillsboro, Mo. GS FY 2016 budget was in excess of \$3.8 million with total personnel expenses of \$2.6 million.

Lutheran Family and Children's Services of Missouri is a social service agency that employs 210 staff members. LFCS has four regional offices in St. Louis, Cape Girardeau, Springfield and Columbia. Services are also provided through offices in St. Charles, Union and Jefferson City, with additional satellite sites available throughout the state. LFCS total payroll for 2015 within the state of Missouri was \$8.6 million with expenditure reaching over \$11.2 million.

MBCH Children and Family Ministries employs approximately 180 persons and contracts with several other individuals and businesses for specific purposes. The 2016 budget is established at \$13,595,395 with gross annual payroll for 2016 projected at \$9,062,770. The agency has offices in the following locations: Bridgeton, Peculiar, Mount Vernon, Kansas City, Springfield and Joplin. Services are also provided in Southeast and Central Missouri as well as the Branson area.

15. For each geographic region proposed, the vendor should indicate the estimated number of clients the vendor anticipates serving annually for non-residential services and residential care services.

GEOGRAPHIC REGION	ESTIMATED ANNUAL NUMBER OF NON-RESIDENTIAL CLIENTS TO BE SERVED	ESTIMATED ANNUAL NUMBER OF RESIDENTIAL CARE CLIENTS TO BE SERVED
1	50	1
2	N/A	N/A
3	150	1
4	105	1
5	N/A	N/A
6	220	8
7	75	1
8	N/A	N/A
9	85	1

Organizational Chart

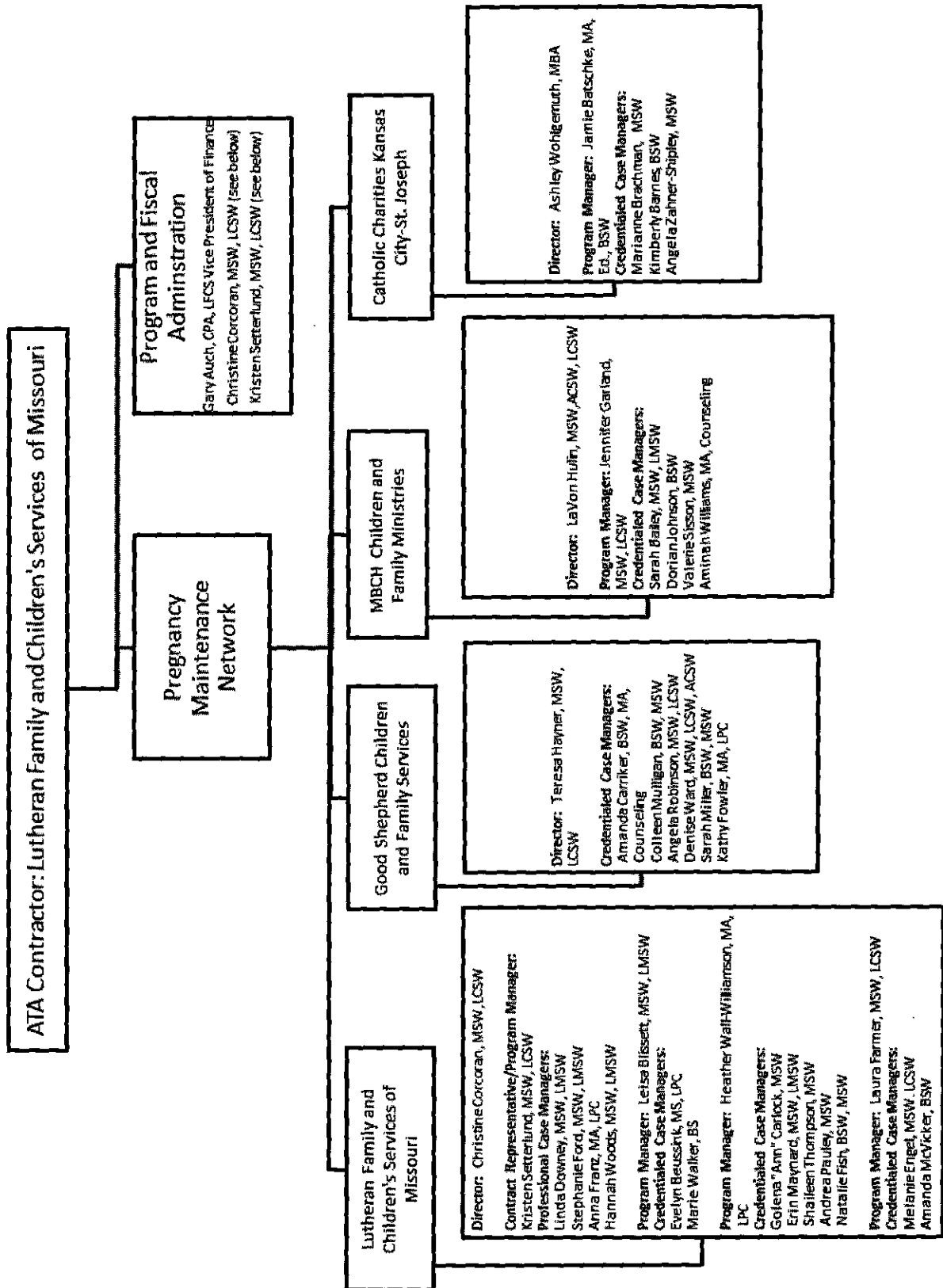


Exhibit H Client Scenario

Narrative

Client Scenario:

Jessica contacts an ATA provider at six weeks gestation. After speaking with Jessica and learning more about her situation, an initial intake visit is set up. Her boyfriend, Todd, who is the father of the baby, is actively involved in her pregnancy and would like to attend appointments as well, which is encouraged by case managers whenever possible. Jessica set up an appointment for the initial intake and will invite Todd to future visits. As transportation can be an issue for Jessica, who lives 15 miles from the nearest office, a home visit was offered and preferred by her.

When the case manager arrives at Jessica's house, there is no one else in the house where she is staying, so confidentiality is not an issue for this visit. At the intake meeting, her case manager obtains information needed to enroll her in the ATA program, including her address and social security number as well as her health and pregnancy history, proof of pregnancy and proof of income. Jessica's zip code, as well as other eligibility factors, is used to determine if a referral is appropriate to the MO HealthNet Prenatal Case Management program, Building Blocks program, Missouri Community-Based Home Visiting Program, or the Healthy Start program. During the intake meeting, Jessica is assessed for past or present domestic violence and if there had been a history, she would have been provided with education and resources on the topic. Jessica's housing situation was also discussed. She was living with a relative at the time, but was told she could not continue living there with a child, so this topic will be discussed throughout pregnancy. Her case manager will also explore options for her unborn child, which include parenting and adoption. Jessica is interested in exploring the option of adoption and so her case manager provides her with information on adoption. At future visits with Jessica and Todd, they will continue to explore the option of adoption, looking at what is in Jessica, her boyfriend and the unborn child's best interest. Her case manager will continue to provide her with services regardless of her decision to parent or make an adoption plan. The information obtained at this visit comprises the Client Intake Form and the Individual Risk and Needs Assessment, which is entered into the state agency's data system.

At this initial intake meeting, Jessica and her case manager complete a service agreement, which lists Jessica's goals and action steps. As Jessica has not applied for public assistance programs yet, her worker makes this a first priority and provides Jessica with the information on MO Healthnet for Pregnant Women, MO Healthnet, Women, Infants, and Children (WIC) and Supplemental Nutrition Assistance Program (SNAP). Her case manager provides her with an overview of each program, information on where to apply for each service, as well as what documents will be needed for enrollment. Jessica is provided with bus tickets, which will allow her to get to her local Family Support Division office to apply for these services. If Jessica had lived in a rural area where there is not a bus line or if she did not feel comfortable taking the bus, her case manager would have given her a ride to the office and assisted her by answering any questions she may have about the process.

Jessica hopes to have a healthy pregnancy so she and her case manager will begin discussing different topics during future visits, such as the importance of prenatal care, nutrition and healthy eating. Jessica will be provided with brochures such as, *Pregnant? Here are 12 important reasons to get monthly check ups*, and *Healthy Eating and Pregnancy: Ten Tips for Good Nurturing*. Jessica expresses her desire for the father to also receive support and education on these topics so her case manager encourages her to invite the father, Todd, to future sessions. Additional community resources will also be provided to Todd based on his assessment of his needs.

At Jessica's request, information was provided on the option of adoption. Jessica and Todd meet regularly with their case manager to learn more about the option of adoption and process their feelings around the choice. Together, they look at the pros and cons of both parenting and adoption and decide to look at adoptive parent profiles. After spending time in thoughtful consideration of the options, they both felt that parenting was the best option and so this worker began discussing their plan to parent in more detail with them. Prior to this time, Jessica had been living with a relative, which will no longer be an option after she has the baby. As a result, they begin exploring housing options together.

One of Jessica's goals is to move into an apartment with her boyfriend, Todd. They have discussed marriage and would like to get married after the baby is born. In the meantime, they have begun talking about finding an apartment together, as their living situations are not conducive to having a child in the home. During visits, Jessica and Todd begin exploring with their case manager what will be needed to achieve this goal. At this time, Jessica and Todd each have a safe place to live, while working to achieve this goal. Finding employment is their first goal so they can afford an apartment of their own. Resources regarding job training and placement are discussed, and referrals are made to the local career center, as well as to local job fairs. Jessica and Todd also talk with their case manager about their relationship and wanting to make sure they have a solid foundation before moving in together. Their case manager discussed healthy relationships with them.

Jessica's boyfriend, Todd, is able to find a full-time job after looking for a month. Jessica is also able to find a part-time job at her college. Together their income is enough to move into an apartment together. They discuss their current income and finances with their case manager more regularly. Together, they develop a budget and evaluate her income and expenses. Jessica and Todd will be able to maintain their bills with both incomes, but do not have the money for a rental deposit yet. After determining there are no other resources for a rental deposit, Jessica will receive one-time assistance through the Alternatives to Abortion program. Jessica provides documentation from her landlord, and arrangements are made with the landlord for the assistance check to be sent as soon as possible. She will continue to meet with her case manager to discuss her financial situation.

As they continue to meet and discuss preparations for the baby, Jessica's need for a Pack n' Play and a car seat were discussed. After exploring community resources and finding that there were no current resources for either, Jessica was provided with a Pack 'n Play and car seat one month prior to delivery. Resources are also explored for when Jessica is on maternity leave after the baby is born and will be out of work. Jessica plans to apply for LIHEAP, which will provide utility assistance while Jessica is unable to work and their budget is tight.

After the baby is delivered, Jessica is ready to go back to school. Her case manager assists her with locating a child care facility and applying for child care assistance. Discussions begin to center around the needs of the baby, both emotionally and physically. Jessica continues to pursue her goal of obtaining a college degree. Her case manager is able to continue meeting with her until her child turns a year old to provide resources and support as Jessica seeks to achieve this goal, as well as others for her family.

In this case scenario, Jessica was a committed client that enrolled in the ATA program early in her pregnancy and engaged with her case manager throughout her pregnancy and until her child turned one. As a result, this scenario covered the remaining 8 1/2 months of her pregnancy and 12 months of her child's first year of life. It also reflects the more comprehensive intervention provided to a client. Case management/parenting sessions are typically 2-3 hours in length (including travel time) and occur on a monthly basis. The client population of the ATA program can be very transient, so some clients may not take benefit of the entire time of eligible service. Attempts are consistently made by case managers during the time of eligibility to locate current clients and initiate services again.

Total price: \$4,736.97

Price Analysis: The client in this scenario was in the program for 21 months. An average cost per client per month for non-residential services across the six geographic regions projected to serve in this proposal (1, 3, 4, 6, 7, 9) was then used to determine the total price. The cost includes direct costs such as program salaries and benefits, travel expenses, employee training and office rent. The cost also covers participant services, including transportation, housing assistance and baby supplies.

**MBE/WBE and/or
Organization for the
Blind/Sheltered
Workshop and/or
SDVE Participation**

(Exhibits I and J - Not Applicable)

Miscellaneous Information

EXHIBIT K, continued

(Complete the following if you have the E-Verify documentation and a current Affidavit of Work Authorization already on file with the State of Missouri. If completing Box C, do not complete Box B.)

BOX C - AFFIDAVIT ON FILE - CURRENT BUSINESS ENTITY STATUS

I certify that Lutheran Family and Children's Services of Missouri (Business Entity Name) **MEETS** the definition of a business entity as defined in section 285.525, RSMo pertaining to section 285.530, RSMo and have enrolled and currently participates in the E-Verify federal work authorization program with respect to the employees hired after enrollment in the program who are proposed to work in connection with the services related to contract(s) with the State of Missouri. We have previously provided documentation to a Missouri state agency or public university that affirms enrollment and participation in the E-Verify federal work authorization program. The documentation that was previously provided included the following.

- ✓ The E-Verify Employment Eligibility Verification page OR a page from the E-Verify Memorandum of Understanding (MOU) listing the vendor's name and the MOU signature page completed and signed by the vendor and the Department of Homeland Security - Verification Division
- ✓ A current, notarized Affidavit of Work Authorization (must be completed, signed, and notarized within the past twelve months).

Name of Missouri State Agency or Public University* to Which Previous E-Verify Documentation Submitted: Missouri Department of Economic Development

(*Public University includes the following five schools under chapter 34, RSMo: Harris-Stowe State University - St. Louis; Missouri Southern State University - Joplin; Missouri Western State University - St. Joseph; Northwest Missouri State University - Maryville; Southeast Missouri State University - Cape Girardeau.)

Date of Previous E-Verify Documentation Submission: 11/12/2015

Previous Bid/Contract Number for Which Previous E-Verify Documentation Submitted: YOP2016-88825
(if known)

Paulette Foerster

Authorized Business Entity Representative's
Name (Please Print)

Paulette Foerster

Authorized Business Entity
Representative's Signature

Lutheran Family and Children's Services of
Missouri

Business Entity Name

August 18, 2016

Date

PauletteF@lfcs.org

E-Mail Address

139986

E-Verify MOU Company ID Number

FOR STATE OF MISSOURI USE ONLY

Documentation Verification Completed By:

Julian K. Lafferty

Buyer

1-6-17
Date

EXHIBIT K, continued

(Complete the following if you DO NOT have the E-Verify documentation and a current Affidavit of Work Authorization already on file with the State of Missouri. If completing Box B, do not complete Box C.)

BOX B – CURRENT BUSINESS ENTITY STATUS

I certify that Catholic Charities of Kansas City-St Joseph (Business Entity Name) **MEETS** the definition of a business entity as defined in section 285.525, RSMo pertaining to section 285.530.

Deacon Dan Powers

Authorized Business Entity Representative's
Name (Please Print)



Authorized Business Entity
Representative's Signature

Catholic Charities of Kansas City-St Joseph
Business Entity Name

8/24/16
Date

dpowers@ccharities.com
E-Mail Address

As a business entity, the vendor must perform/provide each of the following. The vendor should check each to verify completion/submission of all of the following:

- ☐ - Enroll and participate in the E-Verify federal work authorization program (Website: <http://www.uscis.gov/e-verify>; Phone: 888-464-4218; Email: e-verify@dhs.gov) with respect to the employees hired after enrollment in the program who are proposed to work in connection with the services required herein;

AND

- ☐ - Provide documentation affirming said company's/individual's enrollment and participation in the E-Verify federal work authorization program. Documentation shall include EITHER the E-Verify Employment Eligibility Verification page listing the vendor's name and company ID OR a page from the E-Verify Memorandum of Understanding (MOU) listing the vendor's name and the MOU signature page completed and signed, at minimum, by the vendor and the Department of Homeland Security – Verification Division. If the signature page of the MOU lists the vendor's name and company ID, then no additional pages of the MOU must be submitted;

AND

- ☐ - Submit a completed, notarized Affidavit of Work Authorization provided on the next page of this Exhibit.

EXHIBIT K, continuedAFFIDAVIT OF WORK AUTHORIZATION:

The vendor who meets the section 285.525, RSMo, definition of a business entity must complete and return the following Affidavit of Work Authorization.

Comes now Deacon Dan Powers (Name of Business Entity Authorized Representative) as CEO (Position/Title) first being duly sworn on my oath, affirm Catholic Charities (Business Entity Name) is enrolled and will continue to participate in the E-Verify federal work authorization program with respect to employees hired after enrollment in the program who are proposed to work in connection with the services related to contract(s) with the State of Missouri for the duration of the contract(s), if awarded in accordance with subsection 2 of section 285.530, RSMo. I also affirm that Catholic Charities (Business Entity Name) does not and will not knowingly employ a person who is an unauthorized alien in connection with the contracted services provided under the contract(s) for the duration of the contract(s), if awarded.

In Affirmation thereof, the facts stated above are true and correct. (The undersigned understands that false statements made in this filing are subject to the penalties provided under section 575.040, RSMo.)



Authorized Representative's Signature

Deacon Dan Powers

Printed Name

Chief Executive Officer
Title

8/24/16
Date

dpowers@ccharities.com
E-Mail Address

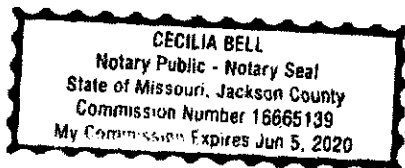
149066
E-Verify Company ID Number

Subscribed and sworn to before me this 24th of August, 2016. I am
(DAY) (MONTH, YEAR)
commissioned as a notary public within the County of Jackson, State of
(NAME OF COUNTY)
Missouri, and my commission expires on 6-5-2020.
(NAME OF STATE) (DATE)



Signature of Notary

8-24-16
Date



To be accepted as a participant in E-Verify, you should only sign the Employer's Section of the signature page. If you have any questions, contact E-Verify Operations at 888-464-4218.

Employer Catholic Charities of Kansas City-St. Joseph, Inc.

Tammy L Clary

Name (Please type or print)

Title

Electronically Signed

09/02/2008

Signature

Date

Department of Homeland Security – Verification Division

Company ID Number: 149066

USCIS Verification Division

Name (Please type or print)

Title

Electronically Signed

09/02/2008

Signature

Date

EXHIBIT K, continued

(Complete the following if you DO NOT have the E-Verify documentation and a current Affidavit of Work Authorization already on file with the State of Missouri. If completing Box B, do not complete Box C.)

BOX B – CURRENT BUSINESS ENTITY STATUS

I certify that Good Shepherd Children & Family Services (Business Entity Name) **MEETS** the definition of a business entity as defined in section 285.525, RSMo pertaining to section 285.530.

Mary Kay Leary

Authorized Business Entity Representative's
Name (Please Print)

Mary Kay Leary
Authorized Business Entity
Representative's Signature

Good Shepherd Children & Family Services
Business Entity Name

8/24/16
Date

mleary@ccstl.org
E-Mail Address

As a business entity, the vendor must perform/provide each of the following. The vendor should check each to verify completion/submission of all of the following:

- ☒ - Enroll and participate in the E-Verify federal work authorization program (Website: <http://www.uscis.gov/e-verify>; Phone: 888-464-4218; Email: e-verify@dhs.gov) with respect to the employees hired after enrollment in the program who are proposed to work in connection with the services required herein;

AND

- ☒ - Provide documentation affirming said company's/individual's enrollment and participation in the E-Verify federal work authorization program. Documentation shall include EITHER the E-Verify Employment Eligibility Verification page listing the vendor's name and company ID OR a page from the E-Verify Memorandum of Understanding (MOU) listing the vendor's name and the MOU signature page completed and signed, at minimum, by the vendor and the Department of Homeland Security – Verification Division. If the signature page of the MOU lists the vendor's name and company ID, then no additional pages of the MOU must be submitted;

AND

- ☒ - Submit a completed, notarized Affidavit of Work Authorization provided on the next page of this Exhibit.

EXHIBIT K, continued**AFFIDAVIT OF WORK AUTHORIZATION:**

The vendor who meets the section 285.525, RSMo, definition of a business entity must complete and return the following Affidavit of Work Authorization.

Comes now Mary Kay Leary (Name of Business Entity Authorized Representative) as Business Director (Position/Title) first being duly sworn on my oath, affirm Good Shepherd Children & Family Services (Business Entity Name) is enrolled and will continue to participate in the E-Verify federal work authorization program with respect to employees hired after enrollment in the program who are proposed to work in connection with the services related to contract(s) with the State of Missouri for the duration of the contract(s), if awarded in accordance with subsection 2 of section 285.530, RSMo. I also affirm that Good Shepherd Children & Family Services (Business Entity Name) does not and will not knowingly employ a person who is an unauthorized alien in connection with the contracted services provided under the contract(s) for the duration of the contract(s), if awarded.

In Affirmation thereof, the facts stated above are true and correct. (The undersigned understands that false statements made in this filing are subject to the penalties provided under section 575.040, RSMo.)

Mary Kay Leary
Authorized Representative's Signature

Mary Kay Leary
Printed Name

Business Director
Title

8/24/16
Date

mleary@ccstl.org
E-Mail Address

192110
E-Verify Company ID Number

Subscribed and sworn to before me this 24 of August, I am
(DAY) (MONTH, YEAR)
commissioned as a notary public within the City of St. Louis, State of
(NAME OF COUNTY)
Missouri, and my commission expires on 10-25-2018
(NAME OF STATE) (DATE)

Julia L. Rudden
Signature of Notary

8.24.2016
Date



JULIA L. RUDDEN
My Commission Expires
October 25, 2018
St. Louis City
Commission #14061590

E-Verify

Company ID Number: 192110

To be accepted as a participant in E-Verify, you should only sign the Employer's Section of the signature page. If you have any questions, contact E-Verify at 888-464-4218.

Employer Good Shepherd Children & Family Services**Jennifer L Prior**

Name (Please Type or Print)

Title

Electronically Signed

Signature

02/20/2009

Date

Department of Homeland Security – Verification Division**USCIS Verification Division**

Name (Please Type or Print)

Title

Electronically Signed

Signature

02/20/2009

Date

EXHIBIT K, continued

Complete the following information for the E-Verify federal work authorization program (Website: <http://www.uscis.gov/e-verify>; Phone: 888-464-4218; Email: e-verify@dhs.gov) with respect to the employees hired after enrollment in the program who are proposed to work in connection with the services required herein;

BOX B – CURRENT BUSINESS ENTITY STATUS

I certify that MBCH Children and Family Ministries (Business Entity Name) **MEETS** the definition of a business entity as defined in section 285.525, RSMo pertaining to section 285.530.

LaVon Hulin

Authorized Business Entity Representative's
Name (Please Print)

LaVon Hulin
Authorized Business Entity
Representative's Signature

MBCH Children and Family Ministries
Business Entity Name

August 25, 2016
Date

Von.hulin@mbch.org
E-Mail Address

As a business entity, the vendor must perform/provide each of the following. The vendor should check each to verify completion/submission of all of the following:

- ☒ - Enroll and participate in the E-Verify federal work authorization program (Website: <http://www.uscis.gov/e-verify>; Phone: 888-464-4218; Email: e-verify@dhs.gov) with respect to the employees hired after enrollment in the program who are proposed to work in connection with the services required herein;

AND

- ☒ - Provide documentation affirming said company's/individual's enrollment and participation in the E-Verify federal work authorization program. Documentation shall include EITHER the E-Verify Employment Eligibility Verification page listing the vendor's name and company ID OR a page from the E-Verify Memorandum of Understanding (MOU) listing the vendor's name and the MOU signature page completed and signed, at minimum, by the vendor and the Department of Homeland Security – Verification Division. If the signature page of the MOU lists the vendor's name and company ID, then no additional pages of the MOU must be submitted;

AND

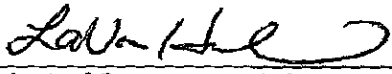
- ☒ - Submit a completed, notarized Affidavit of Work Authorization provided on the next page of this Exhibit.

EXHIBIT K, continuedAFFIDAVIT OF WORK AUTHORIZATION:

The vendor who meets the section 285.525, RSMo, definition of a business entity must complete and return the following Affidavit of Work Authorization.

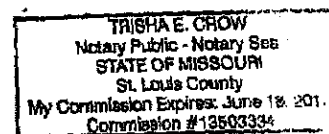
Comes now LaVon Hulin (Name of Business Entity Authorized Representative) as Program Director (Position/Title) first being duly sworn on my oath, affirm MBCH Children and Family Ministries (Business Entity Name) is enrolled and will continue to participate in the E-Verify federal work authorization program with respect to employees hired after enrollment in the program who are proposed to work in connection with the services related to contract(s) with the State of Missouri for the duration of the contract(s), if awarded in accordance with subsection 2 of section 285.530, RSMo. I also affirm that MBCH Children and Family Ministries (Business Entity Name) does not and will not knowingly employ a person who is an unauthorized alien in connection with the contracted services provided under the contract(s) for the duration of the contract(s), if awarded.

In Affirmation thereof, the facts stated above are true and correct. (The undersigned understands that false statements made in this filing are subject to the penalties provided under section 575.040, RSMo.)

<u></u>	<u>LaVon Hulin</u>
Authorized Representative's Signature	Printed Name
<u>Program Director</u>	<u>August 25, 2016</u>
Title	Date
<u>Von.hulin@mbch.org</u>	<u>192636</u>
E-Mail Address	E-Verify Company ID Number

Subscribed and sworn to before me this 25th of August 2016. I am
(DAY) (MONTH, YEAR)
 commissioned as a notary public within the County of St. Louis, State of
(NAME OF COUNTY)
Missouri, and my commission expires on 8-18-17.
(NAME OF STATE) (DATE)

 8-25-16
 Signature of Notary Date





E-VERIFY IS A SERVICE OF DHS

Company ID Number: 192636

To be accepted as a participant in E-Verify, you should only sign the Employer's Section of the signature page. If you have any questions, contact E-Verify at 888-464-4218.

Employer MBCH Children and Family Ministries**Becky Berry**

Name (Please Type or Print)

Title

Electronically Signed**02/23/2009**

Signature

Date

Department of Homeland Security - Verification Division**USCIS Verification Division**

Name (Please Type or Print)

Title

Electronically Signed**02/23/2009**

Signature

Date

EXHIBIT L

Certification Regarding
Debarment, Suspension, Ineligibility and Voluntary Exclusion
Lower Tier Covered Transactions

This certification is required by the regulations implementing Executive Order 12549, Debarment and Suspension, 29 CFR Part 98 Section 98.510, Participants' responsibilities. The regulations were published as Part VII of the May 26, 1988, Federal Register (pages 19160-19211).

(BEFORE COMPLETING CERTIFICATION, READ INSTRUCTIONS FOR CERTIFICATION)

- (1) The prospective recipient of Federal assistance funds certifies, by submission of this proposal, that neither it nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency.
- (2) Where the prospective recipient of Federal assistance funds is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.

Lutheran Family & Children's Services of
Missouri
Company Name

071980353

DUNS # (if known)

Paulette M. Foerster
Authorized Representative's Printed Name

Interim Executive Director
Authorized Representative's Title

Paulette M. Foerster
Authorized Representative's Signature

8-17-2016
Date

Instructions for Certification

1. By signing and submitting this proposal, the prospective recipient of Federal assistance funds is providing the certification as set out below.
2. The certification in this clause is a material representation of fact upon which reliance was placed when this transaction was entered into. If it is later determined that the prospective recipient of Federal assistance funds knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government, the Department of Labor (DOL) may pursue available remedies, including suspension and/or debarment.
3. The prospective recipient of Federal assistance funds shall provide immediate written notice to the person to which this proposal is submitted if at any time the prospective recipient of Federal assistance funds learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.
4. The terms "covered transaction," "debarred," "suspended," "ineligible," "lower tier covered transaction," "participant," "person," "primary covered transaction," "principal," "proposal," and "voluntarily excluded," as used in this clause, have the meanings set out in the Definitions and Coverage sections of rules implementing Executive Order 12549. You may contact the person to which this proposal is submitted for assistance in obtaining a copy of those regulations.
5. The prospective recipient of Federal assistance funds agrees by submitting this proposal that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the DOL.
6. The prospective recipient of Federal assistance funds further agrees by submitting this proposal that it will include the clause titled "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion - Lower Tier Covered Transactions," without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.

EXHIBIT M
MISCELLANEOUS INFORMATION

Outside United States:

If any products and/or services offered under this RFP are being manufactured or performed at sites outside the United States, the vendor MUST disclose such fact and provide details in the space below or on an attached page.

Are any of the vendor's proposed products and/or services being manufactured or performed at sites outside the United States?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
If YES, do the proposed products/services satisfy the conditions described in section 4, subparagraphs 1, 2, 3, and 4 of Executive Order 04-09? (see the following web link: http://sl.sos.mo.gov/CMSImages/Library/Reference/Orders/2004/eo04_009.pdf)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
<p>If YES, mark the appropriate exemption below, and provide the requested details:</p> <p>1. <input type="checkbox"/> Unique good or service. • EXPLAIN: _____</p> <p>2. <input type="checkbox"/> Foreign firm hired to market Missouri services/products to a foreign country. • Identify foreign country: _____</p> <p>3. <input type="checkbox"/> Economic cost factor exists • EXPLAIN: _____</p> <p>4. <input type="checkbox"/> Vendor/subcontractor maintains significant business presence in the United States and only performs trivial portion of contract work outside US. • Identify maximum percentage of the overall value of the contract, for any contract period, attributed to the value of the products and/or services being manufactured or performed at sites outside the United States: <input type="text"/> % • Specify what contract work would be performed outside the United States: _____</p>		

Employee/Conflict of Interest:

Vendors who are elected or appointed officials or employees of the State of Missouri or any political subdivision thereof, serving in an executive or administrative capacity, must comply with sections 105.450 to 105.458, RSMo, regarding conflict of interest. If the vendor or any owner of the vendor's organization is currently an elected or appointed official or an employee of the State of Missouri or any political subdivision thereof, please provide the following information:	
Name and title of elected or appointed official or employee of the State of Missouri or any political subdivision thereof:	n/a
If employee of the State of Missouri or political subdivision thereof, provide name of state agency or political subdivision where employed:	n/a
Percentage of ownership interest in vendor's organization held by elected or appointed official or employee of the State of Missouri or political subdivision thereof:	n/a %

Registration of Business Name (if applicable) with the Missouri Secretary of State:

The vendor should indicate the vendor's charter number and company name with the Missouri Secretary of State. Additionally, the vendor should provide proof of the vendor's good standing status with the Missouri Secretary of State. If the vendor is exempt from registering with the Missouri Secretary of State pursuant to section 351.572, RSMo., identify the specific section of 351.572 RSMo., which supports the exemption.

N00004804 <i>Charter Number (if applicable)</i>	Lutheran Family & Children's Services of Missouri <i>Company Name</i>
If exempt from registering with the Missouri Secretary of State pursuant to section 351.572 RSMo., identify the section of 351.572 to support the exemption:	

STATE OF MISSOURI



Jason Kander
Secretary of State

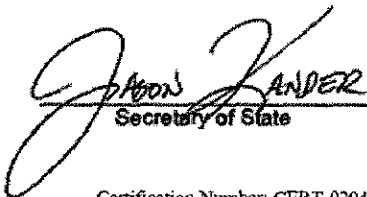
CORPORATION DIVISION
CERTIFICATE OF GOOD STANDING

I, JASON KANDER, Secretary of State of the State of Missouri, do hereby certify that the records in my office and in my care and custody reveal that

LUTHERAN FAMILY AND CHILDREN'S SERVICES OF MISSOURI
N00004804

was created under the laws of this State on the 13th day of February, 1964, and is in good standing, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I hereunto set my hand and cause to be affixed the GREAT SEAL of the State of Missouri. Done at the City of Jefferson, this 4th day of February, 2016.


Secretary of State



Certification Number: CERT-02042016-0009

Exhibit F.

Attachments

Prenatal Parent Education and Parenting Skills Training

Prenatal Parent Education and Parenting Skills Training Topic: Importance of Prenatal Care

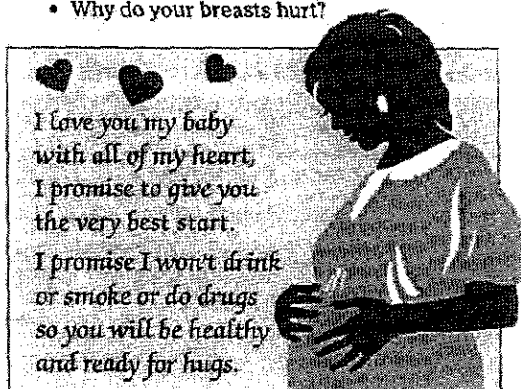
Pregnant?

Here are 12 important reasons
to get monthly check-ups

1. Improve your chances for a healthy baby
 - Help prevent your baby from being born sick
 - Learn what your baby should weigh at birth
 - Learn what "full-term" means
2. Protect your own health

Find out about:

 - possible health risks to you
 - why you get tired
 - the importance of exercise and nutrition
3. Get support from health care providers and other pregnant women
 - Having support helps so much!
 - Establish a trusting relationship with health care providers who you can call for help
4. Learn what the warning symptoms are if something is wrong
 - Is it normal to be dizzy?
 - What if you feel sick to your stomach?
 - What if you get bad cramps?
5. Your questions get answered as your body changes
 - Why do you have to go to the bathroom so often?
 - Should you feel the baby kick?
 - How much weight should you gain?
 - Why do your breasts hurt?



Regular check-ups are important
to you and your child!

6. Learn about your growing baby
 - When do your baby's fingers and toes develop?
 - Can your baby hear you?
 - Is your baby awake or sleeping?
7. How to prevent Sexually Transmitted Diseases (STDs)
 - Can you have sex while you are pregnant?
 - Should you be tested for STDs even if you're sure you are okay?
 - If you have an STD, will your baby get it?
8. Learn to eat right for the growing baby
 - Should you take vitamins?
 - What should you be eating everyday?
 - Does good nutrition really make a difference?
 - Do you need to drink milk?
9. Learn what to expect during labor and delivery
 - What IS labor?
 - When will you know the baby is ready to come?
 - How long does it take?
 - Do you need to be in a hospital?
10. Find out about taking a childbirth education class
 - Will labor and birth make you really sore?
 - How can you get your weight back down?
 - Learn to take care of yourself after delivery
11. Learn how to feed your infant
 - Learn the great benefits of breastfeeding
 - Learn how often a baby needs to eat
 - Learn how to breastfeed or fix a bottle
12. Learn parenting skills
 - How do you take care of an infant?
 - What if the baby gets sick?

Be good to yourself and your developing baby:
see your health care provider every month.
All of these questions and many more will
get answered. It can make a lifetime of
difference to you and your baby.

**Prenatal Parent Education and Parenting Skills Training Topic:
Importance of Prenatal Care**

HEALTHY PREGNANCY



<http://www.womenshealth.gov>

1-800-994-9662

TDD: 1-888-220-5446

Do's and Don'ts

PRINT-AND-GO GUIDE

Eat this. Don't eat that. Do this. Don't do that. Pregnant women are bombarded with Do's and Don'ts. It's tough to keep it all straight. Pregnancy Do's are listed below. The next page has a list of pregnancy Don'ts.

Pregnancy Do's

- See your doctor regularly. Prenatal care can help keep you and your baby healthy and spot problems if they occur.
- Continue taking folic acid throughout your pregnancy. All women capable of pregnancy should get 400 to 800 micrograms (400 to 800 mcg or 0.4 to 0.8 mg) of folic acid every day. Getting enough folic acid lowers the risk of some birth defects. Taking a vitamin with folic acid will help you to be sure you are getting enough.
- Eat a variety of healthy foods. Include fruits, vegetables, whole grains, calcium-rich foods, lean meats, and a variety of cooked seafood.
- Get all essential nutrients, including iron, every day. Getting enough iron prevents anemia, which is linked to preterm birth and low-birth weight babies. Ask your doctor about taking a daily prenatal vitamin or iron supplement.
- Drink extra fluids, especially water.
- Get moving! Unless your doctor tells you otherwise, physical activity is good for you and your baby.
- Gain a healthy amount of weight. Gaining more than the recommended amount during pregnancy increases a woman's risk for pregnancy complications. It also makes it harder to lose the extra pounds

after childbirth. Check with your doctor to find out how much weight you should gain during pregnancy.

- Wash hands, especially after handling raw meat or using the bathroom.
- Get enough sleep. Aim for 7 to 9 hours every night. Resting on your left side helps blood flow to you and your baby and prevents swelling. Using pillows between your legs and under your belly will help you get comfortable.
- Set limits. If you can, control the stress in your life and set limits. Don't be afraid to say "no" to requests for your time and energy. Ask for help from others.
- Make sure health problems are treated and kept under control. If you have diabetes, control your blood sugar levels. If you have high blood pressure, monitor it closely.
- Ask your doctor before stopping any medicines you take or taking any new medicines. Prescription, over-the-counter, and herbal medicine all can harm your baby.
- Get a flu shot. Pregnant women can get very sick from the flu and may need hospital care. Ask your doctor about the flu vaccine.
- Always wear a seatbelt. The lap strap should go under your belly, across your hips. The shoulder strap should go between your breasts and to the side of your belly. Make sure it fits snugly.
- Join a childbirth or parenting class.

page 1

WOMENSHEALTH.GOV

U.S. Department of Health and Human Services, Office on Women's Health

Prenatal Parent Education and Parenting Skills Training Topic: Importance of Prenatal Care

HEALTHY PREGNANCY



<http://www.womenshealth.gov>

1-800-994-9662

TDD: 1-888-226-5446

Steer clear of these pregnancy no-nos to help keep you and your baby safe and healthy.

Pregnancy Don'ts

- Don't smoke tobacco. Quitting is hard, but you can do it! Ask your doctor for help. Smoking during pregnancy passes nicotine and cancer-causing drugs to your baby. Smoking also keeps your baby from getting needed nourishment and raises the risk of miscarriage, preterm birth, and infant death.
- Avoid exposure to toxic substances and chemicals, such as cleaning solvents, lead and mercury, some insecticides, and paint. Pregnant women should avoid exposure to paint fumes.
- Protect yourself and your baby from food-borne illness, which can cause serious health problems and even death. Handle, clean, cook, eat, and store food properly.
- Don't drink alcohol. There is no known safe amount of alcohol a woman can drink while pregnant. Both drinking every day and drinking a lot of alcohol once in a while during pregnancy can harm the baby.
- Don't use illegal drugs. Tell your doctor if you are using drugs. Marijuana, cocaine, heroin, speed (amphetamines), barbiturates, and LSD are very dangerous for you and your baby.
- Don't clean or change a cat's litter box. This could put you at risk for toxoplasmosis, an infection that can be very harmful to the fetus.
- Don't eat swordfish, king mackerel, shark, and tilefish, which are high in mercury.
- Avoid contact with rodents and with their urine, droppings, or nesting material. This includes household pests and pet rodents, such as guinea pigs and hamsters. Rodents can carry a virus that can be harmful or even deadly to your unborn baby.
- Don't take very hot baths or use hot tubs or saunas. High temperatures can be harmful to the fetus, or cause you to faint.
- Don't use scented feminine hygiene products. Pregnant women should avoid scented sprays, sanitary napkins, and bubble bath. These products might irritate your vaginal area, and increase your risk of a urinary tract infection or yeast infection.
- Don't douche. Douching can irritate the vagina, force air into the birth canal and increase the risk of infection.
- Avoid x-rays. If you must have dental work or diagnostic tests, tell your dentist or physician that you are pregnant so that extra care can be taken.

**Prenatal Parent Education and Parenting Skills Training Topic:
Importance of Prenatal Care**

Shots adults may need

Ask your health-care provider which shots you need—and how many doses. Take this chart with you when you get shots, and keep a record of the shots you receive.

SHOT	DATE(S) GIVEN
Hep A (hepatitis A)	
Hep B (hepatitis B)	
HPV (human papillomavirus) for females	
Influenza (flu)	
Meningococcal	
MMR (measles, mumps, rubella)	
Pneumococcal	
Td (tetanus, diphtheria)	
Tdap (tetanus, diphtheria, pertussis)	
Varicella (chickenpox)	
Other	

32819 June/July 2007

Immunizations for a Healthy Pregnancy



For additional copies, contact
Missouri Department of Health and Senior Services
P.O. Box 570
Jefferson City, MO 65102-0570
1-800-219-3224

AN EQUAL OPPORTUNITY/AFFIRMATIVE ACTION EMPLOYER

Services provided on a nondiscriminatory basis.
Alternative forms of this publication for persons with disabilities may be
obtained by contacting the office listed above.
Hearing impaired citizens telephone number 1-800-735-2966.

**Channing
Bete
COMPANY**

**Prenatal Parent Education and Parenting Skills Training Topic:
Importance of Prenatal Care**

You and your baby deserve a great start.

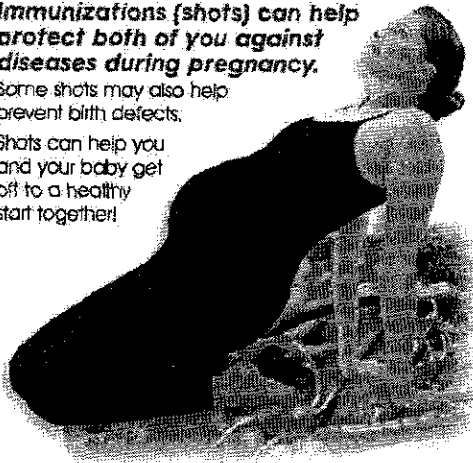
Your baby's well-being depends on you.
It's important to:

- Eat healthy foods.
- Get plenty of rest—and the right amount of activity. (Check with your health-care provider before starting an exercise program.)
- Not smoke.
- Not use alcohol or other drugs.
- See your health-care provider regularly.
- Get any immunizations you need.

***Immunizations (shots) can help
protect both of you against
diseases during pregnancy.***

Some shots may also help
prevent birth defects.

Shots can help you
and your baby get
off to a healthy
start together!



Please read:

Talk to a professional! This folder is not a substitute for the advice of a qualified expert. • The photos in this folder are of models. The models have no relation to the issues presented.

Before you get pregnant

***Find out if you
need any shots.***

Many shots last a lifetime. However, adults may need new shots or "booster" shots. Many shots are safe for pregnant women, but a few are not.



***Talk to your
health-care provider.***

He or she can tell you which shots you need, based on your age and health history. He or she can also run simple tests to see if you need certain shots.



***Ask about shots today.
Do it for yourself and your baby!***

2007 Edition
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Channing Bels Company, One Commonwealth Place, South Dartmouth, MA 01973
To request call (800) 428-7733 or visit www.channing-bels.com
and ask for item number P-033515

(C1-07-C)

Price List A

**Prenatal Parent Education and Parenting Skills Training Topic:
Importance of Prenatal Care**

Know which shots you may need.

If you are pregnant or planning to get pregnant, you may need shots to protect against:

- **influenza (flu)**—If you will be pregnant during flu season, it is recommended that you get the flu shot. (The nasal mist flu vaccine is not considered safe for pregnant women.)
- **tetanus, diphtheria and pertussis**—1 or more shots may be advised if you have never had shots for these diseases or if you need a booster shot.
- **human papillomavirus (HPV)**—You should get the 3 shots for HPV by the time you're 26 and before you become pregnant. The second dose comes 2 months after the first, and third dose comes 6 months after the first.

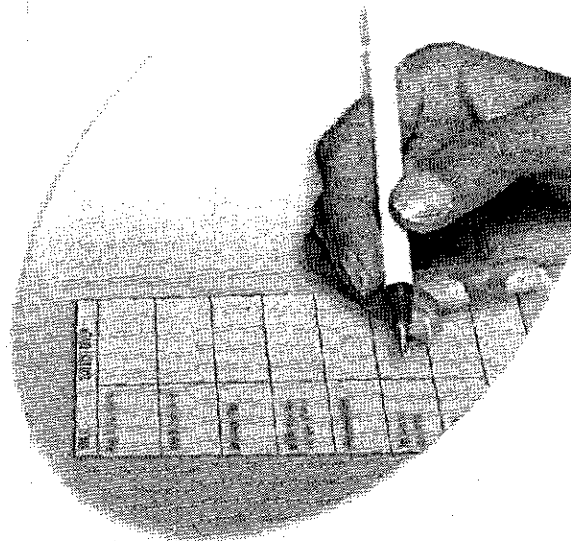
Remember, shots can help protect you and your baby against many serious diseases.



You may also need other shots if you are at special risk for certain diseases, including:

- hepatitis A
- hepatitis B
- meningococcal disease
- pneumococcal disease.

You may be at risk if you plan to travel outside of the U.S., if you are a health-care professional or emergency responder, or for other reasons.



Ask your health-care provider which shots are right for you.

**Prenatal Parent Education and Parenting Skills Training Topic:
Importance of Prenatal Care**

Know which shots to avoid.

Shots you should not get while pregnant or nursing include:

- **MMR**—The shot for measles, mumps and rubella (MMR) can pose a serious risk to your baby. Women should not get pregnant for at least a month after getting the MMR shot.
- **Varicella**—The shot for chickenpox may pose risks during pregnancy. Women should not get pregnant for at least a month after getting this shot.
- **HPV**—The 3 shots for HPV are not recommended during pregnancy. If a woman is found to be pregnant after receiving the first shot, she should delay the next two shots until after the birth.

Ask your health-care provider if any other shots may not be right for you.

If you had a shot for MMR, varicella or HPV—and didn't know you were pregnant—talk to your health-care provider right away.

Ask your health-care provider about the risks and benefits

of any shot you're considering. All shots are tested for safety. Even so, it's important to know about any possible risks. Your health-care provider can help you weigh risks and benefits—and decide what's best for you.

Be sure to read the Vaccine Information Statement (VIS). Your health-care provider is required to give you one before any shot.

Shots can help protect you and your baby!

For more information about shots, contact:

Your health-care provider

Your state or local health department

Ask about:

- where to get low- or no-cost shots
- other steps to take to have a healthy pregnancy.

The Centers for Disease Control and Prevention

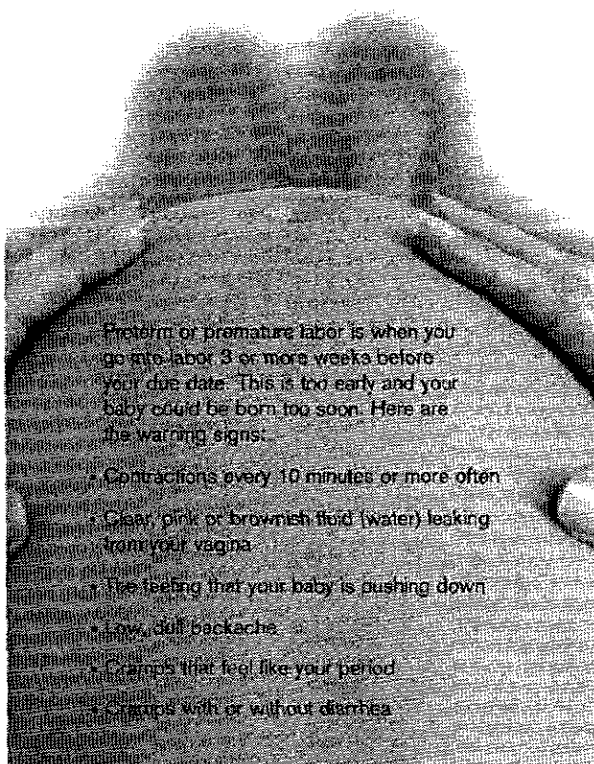
- 1-800-CDC-INFO
(1-800-232-4636)
- 1-888-232-6348 (TTY)
- www.cdc.gov/nip

Shots can help protect you and your baby—and help you get off to a healthy start together!



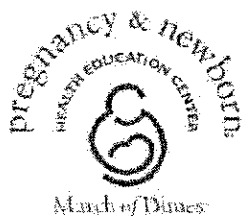
Prenatal Parent Education and Parenting Skills Training Topic: Importance of Prenatal Care

Know the signs of preterm labor.



Preterm or premature labor is when you go into labor 3 or more weeks before your due date. This is too early and your baby could be born too soon. Here are the warning signs:

- Contractions every 10 minutes or more often
- Clear, pink or brownish fluid (water) leaking from your vagina
- The feeling that your baby is pushing down
- Low, dull backache
- Cramps that feel like your period
- Cramps with or without diarrhea



1-888-MODIMES • marchofdimes.com

Know what to do.

Call your health care provider (nurse, doctor or midwife) or go to the hospital right away if you think you are having preterm labor, or if you have any of the warning signs. Call even if you have only one sign.

Your health care provider may tell you to:

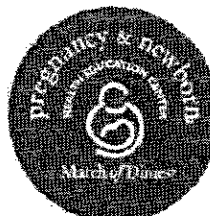
- Come into the office or go to the hospital for a checkup.
- Stop what you are doing. Rest on your left side for one hour.
- Drink 2-3 glasses of water or juice (not coffee or soda).

If the symptoms get worse or do not go away after one hour, call your provider again or go to the hospital. If the symptoms get better, relax for the rest of the day.

Take care of yourself and your baby.

- Get regular prenatal checkups. Start as soon as you know you are pregnant. Go to every appointment.
- Stay away from alcohol and cigarettes. They are not good for you or your baby. Street drugs may start preterm labor.
- Try to avoid stress. Ask family and friends for help.
- If you feel burning or pain when you go to the bathroom, you may have an infection. Call your health care provider.

© March of Dimes Birth Defects Foundation, 2002 007168-02 08/02



visit
marchofdimes.com
call
1-888-MODIMES
e-mail
askus@marchofdimes.com

Saving babies, together

**Prenatal Parent Education and Parenting Skills Training Topic:
Importance of Taking Folic Acid in the Prevention of Neural Tube Defects**

Take folic acid every day!

Folic acid is good for us.

Why?

Because it's good for you! Folic acid is a B vitamin that every cell in your body needs for normal growth and development. Some studies show that it can help protect you from heart disease. If you take it before and during early pregnancy, it can help prevent birth defects of the brain and spine called neural tube defects (NTDs), and birth defects in a baby's mouth called cleft lip and palate. Some studies show it can help prevent heart defects in your baby, too.

How much?

Take a multivitamin that has 400 micrograms of folic acid in it every day. Or you can

eat fortified breakfast cereals or enriched grain products as part of a healthy diet. Look for "fortified" or "enriched" on the product label.

When?

Now! Start taking folic acid every day. It's never too soon to begin protecting your health and your baby's health if you get pregnant.


Want to know more?

marchofdimes.com
facebook.com/marchofdimes
[twitter.com@marchofdimes](https://twitter.com/marchofdimes)

march of dimes
pregnancy & newborn
health education center®

Folic acid is good for me.

**Prenatal Parent Education and Parenting Skills Training Topic:
Impact of Substance Abuse on Pregnancy**



*Give your baby the best chance
of being born healthy.*

9. If you are using alcohol or other drugs and cannot stop, get help.
✓ You may have an addiction. Go to a health care provider or clinic and ask for help.

10. Your health and your baby's health are worth it!
✓ Staying away from alcohol and other drugs gives your baby a good chance of being born strong and healthy.

If you are pregnant and take drugs, your baby could be born with serious problems. Even drugs or medication that are OK for adults could hurt your baby.

For more information or a referral to a program in your area, visit www.drugabuse.gov on the Internet or call the National Institute on Drug Abuse at 1-800-662-4357.

This pamphlet is not a substitute for professional medical care. If you have questions or concerns, please talk with a health care provider.

Written by Maori Richmond.
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A HEALTHY PREGNANCY

Drug Use and Pregnancy

Ten Things You Should Know



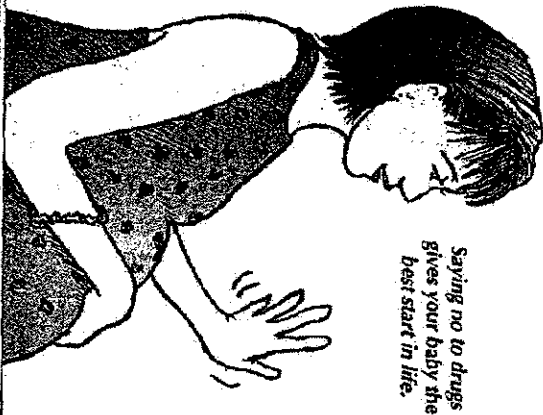
FOR YOU AND YOUR BABY

**Prenatal Parent Education and Parenting Skills Training Topic:
Impact of Substance Abuse on Pregnancy**

DRUG USE AND PREGNANCY

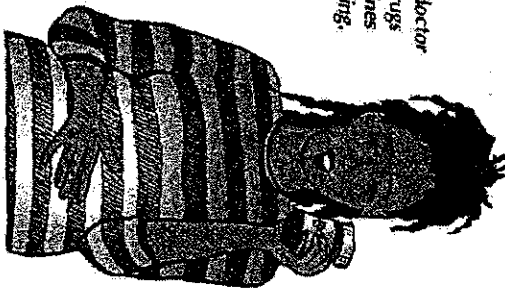
If you are pregnant, using drugs or taking certain medications can hurt you and your baby. Here's what you need to know to give your baby the best chance for a healthy life.

1. Babies whose mothers take drugs while pregnant can be born very sick.
 - ✓ Your baby could be born with a low birthweight or with birth defects.
 - ✓ You may lose your baby (miscarriage).
2. Some problems don't show up until later on.
 - ✓ Your child may have trouble sitting still and learning new things.
 - ✓ Some problems might not show up until your child starts school.



3. Tell your health care provider about all drugs that you are taking.
 - ✓ If you use illegal drugs, it may be scary to tell your doctor. But you and your baby's health depend on it.
 - ✓ Tell your doctor about everything - including over-the-counter medicines, prescriptions, cigarettes, alcohol, and illegal drugs.

Talk to your doctor about all drugs and medicines you are taking.



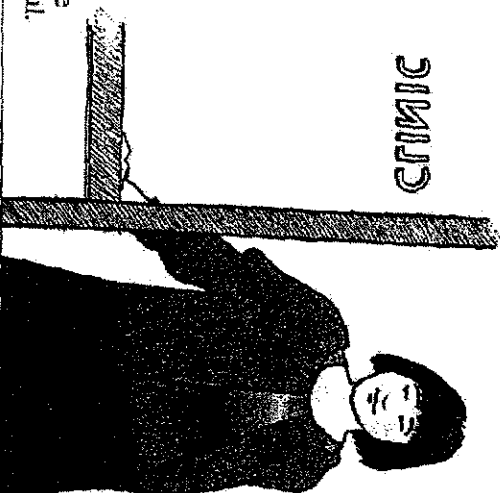
4. If you get sick, talk to your health care provider before taking any medicine.
 - ✓ Some medicines that can help you may hurt your baby.
5. Talk to your health care provider before taking over-the-counter medications.
 - ✓ Medicine that you can buy at the store, like aspirin or cough syrup, may also be harmful.

6. Drugs like marijuana and cocaine can hurt your baby.
 - ✓ Your baby could be born addicted.
 - ✓ He or she may have physical and emotional problems that don't go away.

7. Drinking alcohol during pregnancy is the leading cause of preventable birth defects.
 - ✓ Even small amounts of alcohol may cause birth defects and learning problems.

8. Smoking cigarettes can cause your baby to be born early or too small.
 - ✓ Smoking may also cause stillbirth and sudden infant death syndrome (SIDS).

If you can't stop using drugs, ask for help.



Prenatal Parent Education and Parenting Skills Training Topic: Impact of Substance Abuse on Pregnancy

8.

You'll Protect Your Baby from Secondhand Smoke

- ✓ Infants are more likely to get sick if their parents smoke.
- ✓ If you quit, your baby will be less likely to have colds, bronchitis, ear infections, allergies and asthma.

9.

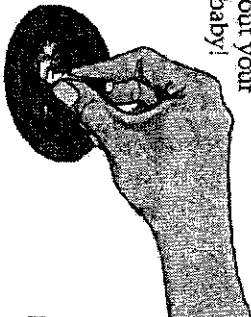
You'll Live to See Your Child Grow

- ✓ You'll reduce your own risk of lung cancer, heart disease and other illnesses.
- ✓ You'll feel better and live longer to help your baby grow.

10.

Try These Quit Tips

- ✓ Pick a day to quit and stick to it.
- ✓ Throw out all your cigarettes.
- ✓ Drink 6 to 8 glasses of water a day.
- ✓ Chew gum, carrots or celery.
- ✓ Keep your hands busy. Knit a baby blanket. Make a baby album.
- ✓ Ask for support from your family, friends and health care provider.
- ✓ If you can't stop, try to cut back.
- ✓ Think about your growing baby!



Smoking for Two

Smoking is bad for everyone. But if you're pregnant, it can also hurt your unborn baby. So help yourself. Help your baby. Read this pamphlet for 10 great reasons to quit!

This pamphlet is not a substitute for professional medical care. If you have questions or concerns, please talk with a health care provider.

Written by Tori Leonard.

Designed by Eva Bernstein. Illustrated by Sue Ellen Parkinson

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HELP YOUR BABY

Ten Best Reasons Not to Smoke While You're Pregnant



HELP YOURSELF

**Prenatal Parent Education and Parenting Skills Training Topic:
Impact of Substance Abuse on Pregnancy**

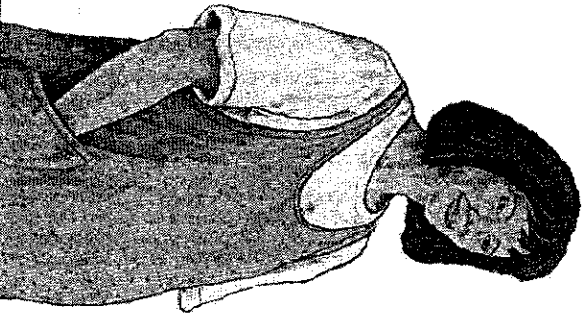
TEN BEST REASONS NOT TO SMOKE WHILE YOU'RE PREGNANT

Are you pregnant or planning to be? You have a special reason to quit smoking – your baby. If you quit now, you can improve your health and protect your baby. So do it for yourself. Do it for your baby. Here are some good reasons to quit smoking.

1.

You Can Do It!

- ✓ Many women quit smoking before they become pregnant or while they are pregnant.
- ✓ You can be one of them.



2.

If You Quit, Your Baby Does Too!

- ✓ When you smoke, the cigarette chemicals reach your baby. They keep your baby from getting the food and oxygen it needs to grow.
- ✓ It's best to quit before you get pregnant. But quitting anytime while you are pregnant will help.

3.

You'll Have a Healthier Pregnancy

- ✓ Women who smoke have a higher risk of bleeding and miscarriage (pregnancy loss).
- ✓ Their babies may also be born too soon.
- ✓ If you quit, your baby is more likely to be born at the right time.

4.

Your Pregnancy May Be Easier

- ✓ Quitting will help you to breathe more easily and cough less.
- ✓ You will have more energy (to carry your baby's extra weight)!
- ✓ Food will taste better. So you may enjoy a healthier diet.

5.

Your Baby Will Be a Healthier Weight

- ✓ Babies born to mothers who smoked during pregnancy weigh less than other babies.
- ✓ Smaller babies get sick more often. They are more likely to die during their first year.
- ✓ If you quit, your baby is more likely to be a healthy weight.



6.

Your Baby's Risk of SIDS Will Be Lower

- ✓ Smoking during pregnancy triples your baby's risk of SIDS (sudden infant death syndrome). If you quit, your baby has a lower risk of SIDS.
- ✓ Your baby is also less likely to be stillborn (born with no signs of life).

7.

Your Breast Milk Will Be Free of Cigarette Chemicals

- ✓ The chemicals in cigarettes also enter your breast milk.
- ✓ Nicotine can cause restlessness, vomiting and diarrhea.
- ✓ Smoking increases your baby's risk of SIDS.
- ✓ Smoking may also reduce your supply of breast milk.

**Prenatal Parent Education and Parenting Skills Training Topic:
Impact of Substance Abuse on Pregnancy**


You can say "No" to secondhand smoke.

- ✓ Post "No Smoking" signs in your home.
- ✓ Toss out cigarettes, matches, lighters and ashtrays.
- ✓ Offer gum and mints as alternatives to smoking.
- ✓ Choose family activities where your baby won't be exposed to smoke.
- ✓ Don't allow smoking in the car.

Secondhand smoke affects everyone.

- ✓ More than 3,000 nonsmokers die each year from lung cancer caused by secondhand smoke.
- ✓ Secondhand smoke causes more than 45,000 deaths from heart disease each year in nonsmokers.

Protect your baby and yourself from secondhand smoke!



Protect your baby!

Babies are fragile – they need to be protected from smoke even before they are born. If you're pregnant, planning to be, or taking care of a baby, read this pamphlet to learn how to keep your baby safe.

Written by Laurie Stohover.
Designed by Eve Bernheim. Illustrated by Meg Biddle.
Special thanks to all of our reviewers.


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KEEP YOUR FAMILY HEALTHY

Secondhand Smoke and Your New Baby



PROTECT YOUR BABY & YOURSELF

Prenatal Parent Education and Parenting Skills Training Topic: Impact of Substance Abuse on Pregnancy

SECONDHAND SMOKE AND YOUR NEW BABY

Babies exposed to smoke are more likely to get sick. Give your baby and yourself the best chance for a healthy life. Here are some tips on how to keep smoke out of your home and away from your baby.

Protect your baby from smoke during pregnancy.

- ✓ If a pregnant woman regularly breathes smoke from someone else's cigarette (secondhand smoke) or smokes, the baby could have weaker lungs than other babies. This can cause serious health problems.
- ✓ Also, if the mother smokes while pregnant, she is more likely to have a miscarriage (end of pregnancy) or have a baby that is born too soon or weighs too little.



For mothers:
If you quit smoking while pregnant, good for you! Now that your baby is born, it is just as important for you to stay smoke free – for your health and your baby's health.

When your baby is born, keep him or her safe from smoke.

- ✓ Babies who breathe secondhand smoke have more colds, ear infections and asthma attacks.
- ✓ Babies exposed to smoke have a greater risk of dying from sudden infant death syndrome (SIDS).
- ✓ Secondhand smoke causes bronchitis and pneumonia in thousands of babies every year.



If you smoke, quit!

- ✓ Your baby is the best reason in the world to be smoke free.
- ✓ If your partner or other family members smoke, ask them to quit with you.
- ✓ Talk to a doctor about stop-smoking aids, classes and support groups.
- ✓ If you can't quit right away, set up a place to smoke outside and away from the baby.

For fathers and other family members:

Do your part to protect your baby. Don't smoke around your baby's mother while she is pregnant, and don't smoke around the baby after he or she is born! If you can, quit. Support the mother's efforts to quit too. Your baby's health is too important to risk.

Ask others not to smoke around your baby.

- ✓ If relatives or visitors smoke, ask them to smoke outside. It's not enough to open a window.
- ✓ Be sure day care workers and babysitters don't smoke around the baby.



**Prenatal Parent Education and Parenting Skills Training Topic:
Nutrition and Healthy Eating**

A HEALTHY PREGNANCY

Healthy Eating and Pregnancy

Ten Tips for Good Nutrition

FOR YOU AND YOUR BABY



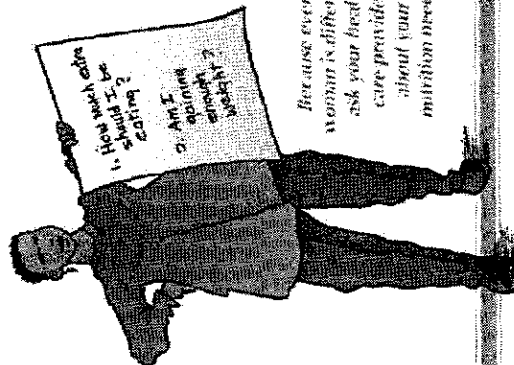
Eating healthy foods during pregnancy can help you feel better. It will also help your baby get the right vitamins and minerals to grow healthy and strong. To learn more, visit www.4women.gov/pregnancy on the Internet.

This pamphlet is not a substitute for professional medical care. If you have questions or concerns, please talk with a health care provider.

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8. Talk to your health care provider about food safety.
 - ✓ Don't eat raw or undercooked meat, fish, chicken or eggs. Food poisoning is risky for you and your baby.
 - ✓ Some fish have high levels of mercury. Mercury can harm your baby. Ask your doctor how much and which fish are OK to eat.
9. Eat six to eight small meals a day.
 - ✓ This can help with morning sickness and indigestion.
10. Most women need to eat about 300 extra calories each day.
 - ✓ Most women need to gain 25 to 35 pounds during pregnancy.
 - ✓ Ask your health care provider how much weight you should gain.



Remember every woman is different. Ask your health care provider about your nutrition needs.

Prenatal Parent Education and Parenting Skills Training Topic: Nutrition and Healthy Eating

HEALTHY EATING AND PREGNANCY

Eating healthy foods during pregnancy is one thing you can do to give your baby a good chance of being born healthy.

1. The food you eat helps your baby grow.
✓ Good nutrition can help prevent birth defects and help your baby have a healthy birthweight.



2. Each day, eat a variety of healthy foods.

- ✓ Vegetables (4 servings a day)
- ✓ Fruits (3 servings a day)
- ✓ Grains such as bread, cereal, pasta or tortillas (6 servings a day)
- ✓ Milk, cheese or yogurt (4 servings a day)
- ✓ Meat or other protein foods such as beans, peanut butter or tofu (2 servings a day)

A serving may be 1/2 cup of vegetables, one piece of fruit, one slice of bread or an 8-ounce glass of milk.

3. Get plenty of calcium and iron.

- ✓ For calcium, eat four servings of milk, cheese, yogurt, firm tofu or dark green leafy vegetables each day.
- ✓ For iron, eat red meats, beans and whole grains.

4. Eat foods high in folic acid.

- ✓ Getting enough folic acid can help prevent certain types of birth defects. It's important to get enough folic acid before you become pregnant and in early pregnancy.
- ✓ Foods with folic acid include spinach, broccoli, beans, oranges and enriched breads, cereals and rice.
- ✓ You need to get about 400 micrograms of folic acid each day.

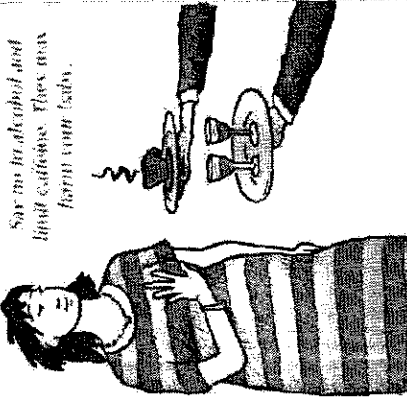
Ask your health care provider if taking a prenatal vitamin is right for you.



5. Take a multivitamin daily.
✓ Most doctors recommend that pregnant women and women trying to get pregnant take a prenatal vitamin every day.

- ✓ Taking a daily multivitamin is one way to make sure you are getting enough folic acid, calcium and other important vitamins and minerals.

Say no to alcohol and limit caffeine. They may harm your baby.



6. Drink at least six to eight glasses of water each day.
✓ You may need to drink even more in hot weather.

7. Say no to alcohol and limit caffeine.
✓ Beer, wine and other kinds of alcohol can hurt your baby.
✓ Too much caffeine (in coffee, soda, tea and chocolate) may harm your baby. Ask your health care provider about how much caffeine is too much.

**Prenatal Parent Education and Parenting Skills Training Topic:
Breastfeeding**

20 Great Reasons to Breastfeed Your Baby

Some women have concerns about breastfeeding their babies because they have heard inaccurate information about it. They may worry that their milk supply will be inadequate or that breastfeeding will be hard to learn, painful, or inconvenient. Once false ideas about breastfeeding are dispelled, women can make informed decisions based on the facts.

Discuss any concerns about breastfeeding with a lactation consultant or healthcare provider. They can tell you the facts and answer any questions you may have about breastfeeding.

To learn more about breastfeeding your baby, call:

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**Prenatal Parent Education and Parenting Skills Training Topic:
Breastfeeding**

10 Great reasons for you

- 1. Breastfeeding often makes weight loss easier and may help you get your figure back faster.*
- 2. Breastfeeding can help your uterus return to its normal size more quickly.*



- 3. Your breastmilk is always ready: no mixing, measuring, or heating; no sterilization or refrigeration; no cleanup.*
- 4. Nighttime feedings are quicker and easier.*
- 5. Breastfeeding saves money—there's nothing to buy.*

**Prenatal Parent Education and Parenting Skills Training Topic:
Breastfeeding**

6. *Going out is simple. Breastfed babies are easy to take along.*
7. *Breastfeeding helps you feel close to your baby and is a warm and cozy time for both of you.*
8. *You are providing the best nutrition for your baby's growing body.*



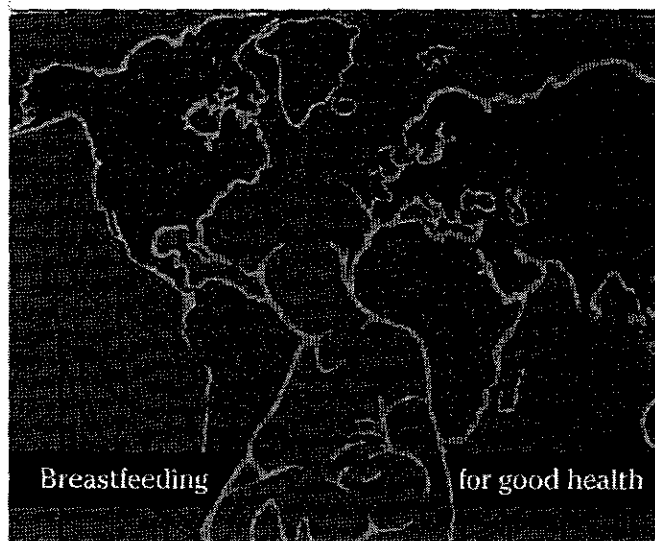
9. *You can read to an older child while you breastfeed your baby. It's a great time for everyone to cuddle.*
10. *Breastfeeding is a special gift that only you can give your baby.*

**Prenatal Parent Education and Parenting Skills Training Topic:
Breastfeeding**

Simply the
healthiest
choice
for you
and
your baby

Originally developed by Debra Swank, RN, BSN, IBCLC
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Sources
AAP policy statement Breastfeeding and the Use of Breastmilk
AHQ Breastfeeding and Maternal and Infant Health Outcomes
in Developed Countries
WHO Evidence on the long-term effects of breastfeeding



**Prenatal Parent Education and Parenting Skills Training Topic:
Breastfeeding**

Your milk is your baby's perfect food

- Babies who are breastfed have fewer health problems than formula-fed babies, including:
 - less severe infections
 - less severe respiratory ailments
 - less severe food allergies for infants and adults
 - less severe eczema and dermatitis
 - less severe diarrhea
- Breastfed babies gain less weight and grow at a slower rate than formula-fed babies.
- Infants born to mothers who breastfeed for six months or longer have a 15-30% lower risk of becoming obese as adults. Infants who are breastfed for six months or longer have a 15-30% lower risk of becoming obese as adults.
- Infants born to mothers who breastfeed for six months or longer have a 15-30% lower risk of becoming obese as adults.

Breastmilk can begin a lifetime of good health for your baby

- Adults who were breastfed have:
 - less diabetes
 - lower rates of high blood pressure
 - lower cholesterol
 - fewer skin problems, including dermatitis
 - less Crohn's disease (chronic diarrhea)
- Breastfeeding helps prevent a lifetime of obesity, reducing adolescent and adult obesity by 15-30%. Breastfed infants learn to eat only what they need, a lesson that can last a lifetime.
- Breast milk is brain food. Some studies show that breastfed children have higher IQs.

Breastfeeding is healthy for mom

- Women who breastfeed lower their risk of several serious diseases, including:
 - high blood pressure
 - high cholesterol
 - heart disease
 - type 2 diabetes
- Breastfeeding provides protection from cancer of the ovaries, reducing a woman's risk by 21%.
- Women who breastfeed longer than 12 months in their life, decrease their risk of breast cancer by 28%.

**Affordable health care
begins with breastfeeding**

Prenatal Parent Education and Parenting Skills Training Topic: Breastfeeding

Breastfeeding tips

Early Start

- Put baby to the breast to nurse as soon as possible after birth.

How Often?

- Baby needs to nurse 10-12 times in 24 hours. The more you nurse the more milk you will have.
- Frequent breastfeeding stimulates milk production.

Colostrum

- Produced in first few days.
- Small amounts, but concentrated. Perfect for a newborn's tiny stomach.
- Protects against infection.
- Clears meconium—helps reduce jaundice.
- Satisfies baby's thirst and hunger.

Engorgement

- Nurse often!
- Cold compresses or cabbage leaves between feedings to reduce swelling.
- Warm showers or compresses before feeding.
- Soften breasts by expressing some milk.
- Use gentle finger pressure around the base of the nipple to move some of the swelling slightly backward and upward into the breast.

Baby Needs Night Feedings

Easily digested human milk passes quickly

through the digestive system. This is why breastfed babies wake at night to eat.

Enough Milk?

After milk comes in:

- 5-6 wet disposable diapers in 24 hours.
- 2-5 bowel movements per day mean baby is getting enough milk.

Milk Too Weak?

Never! Milk changes throughout the feeding. Express one drop of milk before and after a feeding and see the difference. Foremilk is watery to satisfy thirst. Hindmilk is creamy to satisfy hunger.

Ensuring Adequate Milk Supply

- Finish the first breast first.
- Offer other breast if baby is still hungry.
- Use breast compressions to keep baby interested and awake during feedings.

Sore Nipples

Remember: Correct positioning and latch-on are most important for preventing sore nipples.

- Break suction before taking baby off the breast.
- Offer the least sore breast first.
- Use only plain water for washing.

Helpful Hints

- Watch your baby, not the clock!
- La Leche League leaders are accredited volunteers who are available to help in person, over the phone, and online. Locate an LLL leader near you @ www.lll.org

- Use ultra pure modified lanolin, like HPA® Lanolin, or hydrogel pads without cloth backing to speed healing.
- Check with an LLL leader for help.

Blocked Duct

If milk becomes blocked a tender lump may appear in the breast.

- Apply heat.
- Get plenty of rest.
- Nurse frequently.
- Check positioning.

Growth Spurts

Baby may nurse more often at times to build milk supply. "Frequent days" often occur around 3 weeks of age.

Back to Work

- Find out about facilities at work for expressing and storing your milk.
- Best to wait until milk supply is well established.
- Pump or express milk at work.
- Take milk home for the next day's feedings.
- Frequent breastfeeding when at home.

Bottles

- Babies who are feeding well don't need bottles.
- If using a bottle while separated from baby, use a slow-flow nipple. Fast-flow nipples may confuse baby and cause him to reject feeding at the breast.

Latching On

- Sit back comfortably (don't lean over baby).
- Support your breast with one hand.
- Place baby's head on your forearm. Pull baby's feet in close to your other side. Hold baby at level of breast.
- Baby's face and body are turned toward mother.
- Tickle baby's lips, and wait for him to open wide.



- Bring baby to the breast with his head slightly tilted back. Baby's chin will press into the breast first. More of your breast will be covered with his lower jaw.

- When baby is latched well, his chin should be pressed into the breast, and his nose slightly away from it.

Prenatal Parent Education and Parenting Skills Training Topic: Breastfeeding



La Leche League

927 North Plum Street, Suite 100 • Schaumburg, IL 60193 USA
847.515.7750 • fax 847.569.0456 • 800.LALECHE

Claves de la Lactancia



Comienza pronto

- Pon tu bebé al pecho lo antes posible después del parto.

Con qué frecuencia

- El bebé necesita mamar de 10 a 12 veces en 24 horas. Cuanto más amamantes a tu bebé más leche tendrás.
- El amamantamiento frecuente estimula la producción de leche.

Calostro

- Se produce en cantidades pequeñas durante los primeros días (cucharaditas, no onzas).
- Pequeñas cantidades pero concentradas. Perfectas para el pequeño estómago del recién nacido.
- Protege al bebé contra infecciones.
- Facilita la expulsión del meconio—Ayuda a reducir la ictericia.
- Satisface la sed y el hambre del bebé.

Pechos congestionados

- ¡Amamanta con frecuencia!
- Aplica hojas de col o paños fríos entre las tomas para reducir la hinchazón.
- Duchas o paños calientes antes de amamantar.
- Extrae un poco de leche para ablandar tus pechos.
- Presiona ligeramente la base del pezón para mover un poco la hinchazón hacia atrás y hacia arriba en el pecho.

El bebé necesita comer durante la noche

La leche materna se digiere fácilmente pasando rápidamente por el sistema digestivo. Es por esto que los bebés amamantados se

despiertan durante la noche para mamar.

¿Suficiente Leche?

Después que baja la leche:

- 5-6 pañales desechables en 24 horas.
- 2-5 evacuaciones al día significan que el bebé está recibiendo suficiente leche.
- ¿La Leche es muy Rala?
- ¡Nunca! La leche materna cambia durante una mamada. Extrae una gota de leche antes y después de una mamada y verás la diferencia. Primero la leche es rala para satisfacer la sed. Después la leche es más cremosa para satisfacer el hambre.

Asegurándose de que el bebé reciba lo suficiente

- Terminar el primer pecho primero.
- Ofrecer el otro pecho si el bebé aún está hambriento
- Presionar el pecho para mantener al bebé interesado y despierto durante las tomas.
- Pezones adoloridos
- Recuerda: Una posición correcta y la manera como agarra el bebé el pezón son muy importantes para prevenir pezones adoloridos. Lo principal es revisar la posición, el abdomen del bebé frente al tuyo.

■ Rompe la succión antes de quitar al bebé del pecho.

■ Primero ofrécele el pecho que te duela menos.

■ Usa sólo agua al ducharte, sin jabón.

Detalles Útiles

- ¡Observa a tu bebé, no el reloj!
- Las líderes de La Liga de La Leche son voluntarias acreditadas que atienden en persona, por teléfono y vía internet. Localiza a una líder cerca de ti en: www.llli.org

■ Utiliza lanolina pura modificada, como Lanolina HPA o compresas de hidrogel sin forro de algodón para acelerar la cura.

■ Para más ayuda comunícate con una líder de LLL.

Conducto tapado

Si se tapa el flujo de la leche un bulto doloroso puede aparecer en el pecho.

- Aplica calor.
- Descansa lo más que puedas.
- Amamanta frecuentemente.
- Revisa la posición es que estás amamantando.

Crisis de crecimiento

A veces el bebé puede querer el pecho más seguido para aumentar la producción de leche. Este crecimiento repentino normalmente ocurre alrededor de las 3 semanas de vida.

Si vas a regresar a trabajar

- Averigua sobre un lugar en tu trabajo para poder extraer y conservar tu leche.
- Lo ideal es esperar hasta que la lactancia esté bien establecida.

■ Extrae leche en el trabajo.

■ Lleva la leche a la casa para la alimentación del día siguiente.

■ Amamanta frecuentemente cuando estés en casa.

Biberones

■ Los bebés que se alimentan bien al pecho, no necesitan biberones.

■ Si se utilizan biberones en los momentos de separación entre la madre y el bebé, utilizar tetinas de flujo lento. Las tetinas con el flujo muy rápido pueden confundir al bebé y hacer que rechace el pecho.

Para Iniciar la Succión

- Siéntate cómodamente (no te agaches sobre tu bebé).
- Sujeta tu pecho con una mano.
- Pon la cabeza de tu bebé sobre el doblez de tu brazo. Arrima sus piernas a tu cuerpo. Pon tu bebé al nivel de tu pecho.
- Tu bebé debe estar completamente de lado, su abdomen frente al tuyo.
- Cosquillea los labios del bebé y espera hasta que abra muy bien la boca.



■ Acerca el bebé al pecho con la cabeza ligeramente echada hacia atrás. La barbilla del bebé será la que presionará el pecho en primer lugar. La mandíbula inferior del bebé cubrirá gran parte del pecho.



■ Cuando el bebé esté bien enganchado al pecho, su barbilla estará presionando el pecho mientras que su nariz estará ligeramente separada.

**Prenatal Parent Education and Parenting Skills Training Topic:
Shaken Baby Syndrome**

take a break,
don't shake.

Shaking a baby can cause serious brain injury, bleeding in the brain, and even death. Shaking a baby is never worth the risk.

Want to prevent SBS by taking these simple steps:

- Be careful when choosing to "soothe" your baby. The only way to keep your baby safe when he or she becomes fussy is to hold him or her close to your body and rock him or her gently.
- Take a break when you feel frustrated. Put your baby in his or her crib and take a few minutes to calm down.
- If you are still feeling frustrated, call a trusted friend or family member for help.
- If you are still feeling frustrated, call the National Child Abuse Report Child Abuse Hotline at 1-800-392-3738.

Children's Trust Fund

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PO Box 100
Baltimore, MD 21202-0100
410-396-1234 • www.ctf4kids.org

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Never
shake
a baby.

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**Prenatal Parent Education and Parenting Skills Training Topic:
Shaken Baby Syndrome**

Babies Cry...A lot!

- **Cry early.** During the first 6 months of life, even that of a normal, healthy baby, may cry up to 6 hours or more each day.
- **Babies will cry the most** at age 2 months.
- **But have patience.**
- **After the age of 2 months,** your baby will begin to cry less each week.

Crying — the #1 reason babies are shaken or hurt by their caregivers.

Babies Cry...A lot!

Here are some ideas to help soothe and jinx your baby:

- **First,** check to see if your baby is hungry or needs a diaper change.
- **Call your doctor** if you think your baby might be sick.

Babies Cry...A lot!

- **Try...**
- **rocking, walking or taking** with your baby
- **going for a ride** in the car;
- **giving your baby a warm bath;**
- **singing or playing a recorded lullaby** or other soothing music.

Remember...sometimes your baby will cry no matter what you do.

Babies Cry...A lot!

It's really frustrating!
But if you become TOO frustrated:

- **SHOULDER WALK** your baby.
- **Take a break.** Put your baby down or big or let them sit in a safe place.
- **Remember,** baby's cry is not a cry for help. It's a cry for help to get your attention.
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When you feel your frustration rising, take a break. Put your baby down or let them sit in a safe place.

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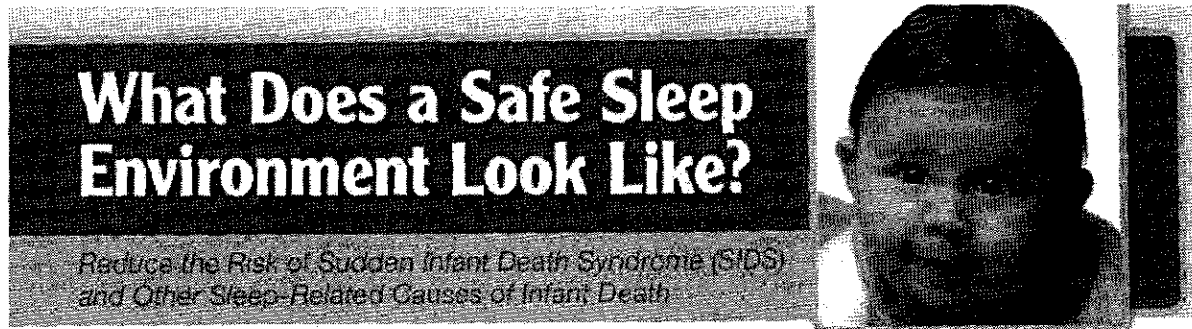
**Shaking a baby is dangerous.
Shaking a baby can cause:**

- brain damage
- blindness
- spinal injuries & paralysis
- seizures
- severe learning & behavior problems
- even death

**WW Children's
Trust Fund**

1-800-4-A-CHILD
www.wwchildrens.org

**Prenatal Parent Education and Parenting Skills Training Topic:
Safe Sleep for Infants (following the 2011 AAP recommendations)**



What Does a Safe Sleep Environment Look Like?

Reduce the Risk of Sudden Infant Death Syndrome (SIDS) and Other Sleep-Related Causes of Infant Death

Use a firm sleep surface, such as a mattress in a safety-approved* crib, covered by a fitted sheet.

Do not use pillows, blankets, sheepskins, or crib bumpers anywhere in your baby's sleep area.

Keep soft objects, toys, and loose bedding out of your baby's sleep area.

Do not smoke or let anyone smoke around your baby.

Make sure nothing covers the baby's head.

Always place your baby on his or her back to sleep, for naps and at night.

Dress your baby in sleep clothing, such as a one-piece sleeper, and do not use a blanket.

Baby's sleep area is next to where parents sleep.

Baby should not sleep in an adult bed, on a couch, or on a chair alone, with you, or with anyone else.



*For more information on crib safety guidelines, contact the Consumer Product Safety Commission at 1-800-636-2772 or <http://www.cpsc.gov>



Division of Intramural Research
National Institute of Child Health and Human Development



SAFE TO SLEEP

**Prenatal Parent Education and Parenting Skills Training Topic:
Safe Sleep for Infants (following the 2011 AAP recommendations)**

Safe Sleep For Your Baby



- Always place your baby on his or her back to sleep, for naps and at night, to reduce the risk of SIDS.
- Use a firm sleep surface, such as a mattress in a safety-approved* crib, covered by a fitted sheet, to reduce the risk of SIDS and other sleep-related causes of infant death.
- Room sharing—keeping baby's sleep area in the same room where you sleep—reduces the risk of SIDS and other sleep-related causes of infant death.
- Keep soft objects, toys, crib bumpers, and loose bedding out of your baby's sleep area to reduce the risk of SIDS and other sleep-related causes of infant death.
- To reduce the risk of SIDS, women should:
 - Get regular health care during pregnancy, and
 - Not smoke, drink alcohol, or use illegal drugs during pregnancy or after the baby is born.
- To reduce the risk of SIDS, do not smoke during pregnancy, and do not smoke or allow smoking around your baby.
- Breastfeed your baby to reduce the risk of SIDS.
- Give your baby a dry pacifier that is not attached to a string for naps and at night to reduce the risk of SIDS.
- Do not let your baby get too hot during sleep.
- Follow health care provider guidance on your baby's vaccines and regular health checkups.
- Avoid products that claim to reduce the risk of SIDS and other sleep-related causes of infant death.
- Do not use home heart or breathing monitors to reduce the risk of SIDS.
- Give your baby plenty of Tummy Time when he or she is awake and when someone is watching.



Remember Tummy Time!

Place babies on their stomachs when they are awake and when someone is watching. Tummy Time helps your baby's head, neck, and shoulder muscles get stronger and helps to prevent flat spots on the head.

* For more information on crib safety guidelines, contact the Consumer Product Safety Commission at 1-800-638-2772 or <http://www.cpsc.gov>.

For more information about SIDS and the Safe to Sleep® campaign:
Mail: 31 Center Drive, 31/2A32, Bethesda, MD 20892-2425
Phone: 1-800-505-CRIB (2742)
Fax: 1-866-760-5947
Website: <http://safetosleep.nichd.nih.gov>
NIH Pub. No. 12-5755
August 2014

Safe to Sleep® is a registered trademark of the U.S. Department of Health and Human Services.



Elunice Kennedy Shriver National Institute of Child Health and Human Development

**Prenatal Parent Education and Parenting Skills Training Topic:
Safe Sleep for Infants (following the 2011 AAP recommendations)**

Good to Know

Safe Sleeping

Safe sleep is the most important thing you can do to keep your baby safe. Follow these guidelines to help your baby sleep safely:

- Always place your baby on their back to sleep.
- Use a firm, flat surface for your baby to sleep on.
- Avoid soft bedding, such as pillows, blankets, and stuffed animals.
- Avoid overheating your baby.
- Avoid smoking, drinking alcohol, or using drugs around your baby.
- Breastfeed your baby if possible.
- Offer a pacifier if your baby likes it.
- Avoid baby walkers.
- Avoid car seats in strollers or cribs.
- Avoid baby monitors that have a camera.
- Avoid baby monitors that have a microphone.
- Avoid baby monitors that have a video screen.
- Avoid baby monitors that have a night light.
- Avoid baby monitors that have a lullaby.
- Avoid baby monitors that have a timer.
- Avoid baby monitors that have a temperature sensor.
- Avoid baby monitors that have a motion sensor.
- Avoid baby monitors that have a sound sensor.
- Avoid baby monitors that have a vibration sensor.
- Avoid baby monitors that have a heart rate sensor.
- Avoid baby monitors that have a breathing sensor.
- Avoid baby monitors that have a temperature sensor.
- Avoid baby monitors that have a motion sensor.
- Avoid baby monitors that have a sound sensor.
- Avoid baby monitors that have a vibration sensor.
- Avoid baby monitors that have a heart rate sensor.
- Avoid baby monitors that have a breathing sensor.

Missouri KIDS
All - Threat Child Abuse

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Safe Sleep for Babies - A Guide for Parents & Caregivers

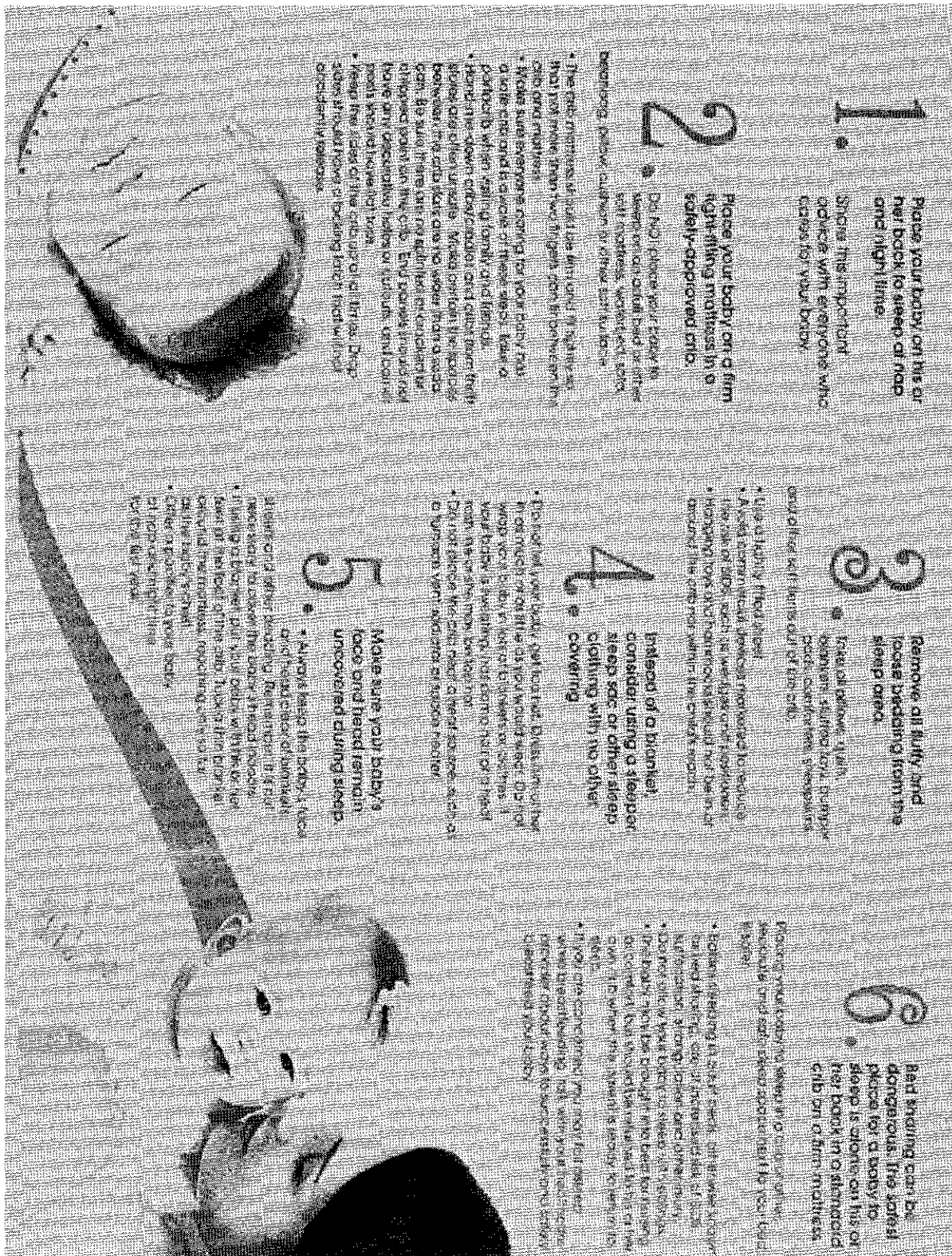
Crib Safe

Safe Sleep for Babies - A Guide for Parents & Caregivers

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Scan QR code (requires app) to go to www.ctsfkids.org

**Prenatal Parent Education and Parenting Skills Training Topic:
Safe Sleep for Infants (following the 2011 AAP recommendations)**



- # 1

Place your baby on his or her back to sleep at nap and night time.

• Since this important advice with everyone who cares for your baby.
- # 2

Place your baby on a firm, flat, mattress in a safety-approved crib.

• Do NOT place your baby to sleep on an adult bed or other soft mattress, waterbed, sofa, beanbag, pillow cushion or other soft surface.

• The crib mattress should be without any gaps or holes that your baby's head, arms or legs can fit through.

• Make sure everyone caring for your baby has a safe crib and is aware of these steps. Use a portable crib when visiting family and friends.

• Hand the sleep crib, cot, and other baby furniture when you leave. Make certain the crib is between the crib and the wall, no more than a inch apart. Be sure there are no additional cribs or cribs that are not approved for use. Ensure the crib is not damaged and has no loose parts or pieces.

• Keep the crib of the crib up of all the crib. Drop down the crib from a bed and not from a bed.
- # 3

Remove all fluffy and loose bedding from the sleep area.

• Use all pillows, quilts, blankets, stuffed toys, bumper pads, comforters, sweaters, and other soft items out of the crib.

• Use a firm, flat, mattress in a safety-approved crib.

• A firm, flat, mattress in a safety-approved crib.

• A firm, flat, mattress in a safety-approved crib.
- # 4

Instead of a blanket, consider using a sleepers, sleep sac or other sleep clothing with no other covering.

• Do not let your baby get too hot. Dress him or her in one more or one less than you would wear. Do not wrap your baby in a blanket or cover him or her with a blanket.

• If your baby is sweating, not coming out of his head, or if he or she has a fever, do not cover him or her.

• Do not let your baby get too hot. Dress him or her in one more or one less than you would wear. Do not wrap your baby in a blanket or cover him or her with a blanket.
- # 5

Make sure your baby's face and head remain uncovered during sleep.

• Always keep the baby's face and head uncovered during sleep.

• Always keep the baby's face and head uncovered during sleep.

• Always keep the baby's face and head uncovered during sleep.
- # 6

Bed sharing can be dangerous. The safest place for a baby to sleep is alone on his or her back in a crib with a firm mattress.

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**Prenatal Parent Education and Parenting Skills Training Topic:
Car Seat Safety**

7 out of 10 kids

are at risk in a traffic crash!

For more information contact the Missouri Department of Transportation Highway Safety Division at 800-800-8ET (3378) or go to www.mdot.org

MISSOURI DEPARTMENT OF TRANSPORTATION
ARRIVE ALIVE

Prenatal Parent Education and Parenting Skills Training Topic:
Car Seat Safety

Play by the Rules


MISSOURI'S CHILD RESTRAINT LAW

Growing Up Safe

As children grow, how they are secured in your car, truck or SUV should change. Save your child from injury or death by buckling them in correctly.


Lap and shoulder safety belts

Children 8 and over or weighing at least 80 pounds or at least 4'9" tall are required to be secured by a safety belt or booster seat appropriate for that child.




Booster seats with lap and shoulder belt

Children ages 4 through 7 who weigh at least 40 pounds must be in an appropriate child safety seat or booster seat unless they are 80 pounds or 4'9" tall.



Child safety seats

Children less than 4 years old or less than 40 pounds must be in an appropriate child safety seat.



7 out of 10 kids are at risk in a traffic crash!

As of August 20, 2010, Missouri law requires all children under the age of eight to be in an appropriate child safety seat or booster seat. Over 21,000 lbs. of 4'9" tall.

**Prenatal Parent Education and Parenting Skills Training Topic:
Car Seat Safety**



CHILDREN'S
DIVISION

May/June 2012

SAFETY TIP

CAR SEAT SAFETY: Is Your Child in the Correct Seat?

Proper car seat safety and usage has been found to drastically reduce the risk of death for children in car accidents. Research on the impact of using child safety seats has found them to reduce death by 71 percent for infants (under 1 year old) and by 54 percent for toddlers (1-4 years old) in cars. For infants and toddlers in light trucks, the reductions are almost 60% for both infants and toddlers. It is important to choose the right seat for your child.

Baby (or infant-only) car seats: These should always face the rear of the car. They have a weight limit of between 22 and 35 pounds. When your baby reaches the weight or height limits for his infant seat, move him to a rear-facing convertible car seat.





Convertible (or infant-toddler) car seats: These function as both rear-facing seats for babies and toddlers and forward-facing seats for older children. Many new ones are designed to hold a child of up to 40 pounds rear-facing and up to 70 pounds forward-facing. It's safest to leave your child rear-facing as long as possible – in fact, the latest guidelines from the American Academy of Pediatrics (AAP) say to keep your child in a rear-facing car seat until the age of 2, or until he reaches the seat's maximum rear-facing height and weight limits.



Belt-positioning booster seats: These seats are for kids who are at least 4 and weigh at least 40 pounds. They use the regular car lap and shoulder belts to secure the child. Backless boosters are fine when used with an automobile seat that provides head support. According to Missouri Statute, children should remain in a booster seat until they are age 8 OR 80 pounds OR 4'9" tall.

**RESOURCES/
LINKS**

✓ **Missouri Child Safety Passenger Law**
<http://www.mo-dot.gov/safety/documents/CPSLawEnforcementInfoCards.pdf>

✓ **How to Choose and Use a Car Seat**
http://www.babycenter.com/01/car-seat-safety-how-to-choose-and-use-a-car-seat_399.bc

**Prenatal Parent Education and Parenting Skills Training Topic:
Immunizations**

Immunization record

Here are the recommended ages for when a child should get shots. But if your child missed any, ask your child's health-care provider about catch-up shots. Also ask about other shots for children at higher risk—for example, due to a chronic illness or travel.

CHILD'S AGE	SHOT
Birth	Hep B (hepatitis B)
1-2 months	Hep B
2 months	DTaP (diphtheria, tetanus and pertussis) IPV (polio) Hib (Haemophilus influenzae type b) PCV (pneumococcal disease) Rota (rotavirus)
4 months	DTaP IPV Hep B (if needed) Hib PCV Rota
6 months	DTaP Hib (if needed) PCV Rota
6-18 months	Hep B IPV
6-59 months (yearly)	Influenza (flu) with 2 doses needed 1st year
12-15 months	Hib MMR (measles, mumps and rubella) PCV Var (chickenpox)
12-23 months	Hep A (hepatitis A)
15-18 months	DTaP
18+ months	Hep A at least 6 months after 1st dose
4-6 years (before starting school)	MMR DTaP IPV Var
11-12 years	MCV4 (meningococcal disease) Tdap (tetanus, diphtheria and pertussis) HPV (human papillomavirus) for females, with a 2nd dose in 2 months and a 3rd dose in 6 months
	Other:

2025 12/31, 11/20, 10/20, 9/20, 8/20, 7/20, 6/20, 5/20, 4/20, 3/20, 2/20, 1/20, 12/19, 11/19, 10/19, 9/19, 8/19, 7/19, 6/19, 5/19, 4/19, 3/19, 2/19, 1/19, 12/18, 11/18, 10/18, 9/18, 8/18, 7/18, 6/18, 5/18, 4/18, 3/18, 2/18, 1/18, 12/17, 11/17, 10/17, 9/17, 8/17, 7/17, 6/17, 5/17, 4/17, 3/17, 2/17, 1/17, 12/16, 11/16, 10/16, 9/16, 8/16, 7/16, 6/16, 5/16, 4/16, 3/16, 2/16, 1/16, 12/15, 11/15, 10/15, 9/15, 8/15, 7/15, 6/15, 5/15, 4/15, 3/15, 2/15, 1/15, 12/14, 11/14, 10/14, 9/14, 8/14, 7/14, 6/14, 5/14, 4/14, 3/14, 2/14, 1/14, 12/13, 11/13, 10/13, 9/13, 8/13, 7/13, 6/13, 5/13, 4/13, 3/13, 2/13, 1/13, 12/12, 11/12, 10/12, 9/12, 8/12, 7/12, 6/12, 5/12, 4/12, 3/12, 2/12, 1/12, 12/11, 11/11, 10/11, 9/11, 8/11, 7/11, 6/11, 5/11, 4/11, 3/11, 2/11, 1/11, 12/10, 11/10, 10/10, 9/10, 8/10, 7/10, 6/10, 5/10, 4/10, 3/10, 2/10, 1/10, 12/09, 11/09, 10/09, 9/09, 8/09, 7/09, 6/09, 5/09, 4/09, 3/09, 2/09, 1/09, 12/08, 11/08, 10/08, 9/08, 8/08, 7/08, 6/08, 5/08, 4/08, 3/08, 2/08, 1/08, 12/07, 11/07, 10/07, 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**Prenatal Parent Education and Parenting Skills Training Topic:
Immunizations**

Is your child's health at risk?

Yes—unless he or she is protected with shots!

Shots (immunizations) prevent some serious illnesses that cause:

- pain
- fever
- rashes
- coughs
- sore throats
- hearing loss
- blindness
- crippling
- brain damage
- death.



Shots save lives!

Please read:

Talk to your health-care provider! This folder is not a substitute for the advice of a qualified health-care provider. • The photos in this folder are of models. The models have no relation to the issues presented.

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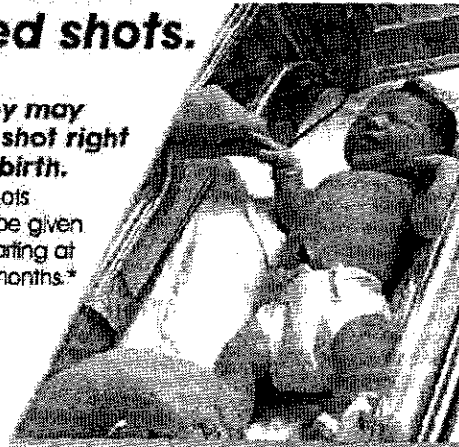
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Price List A

All babies need shots.

A baby may get 1 shot right after birth.

*More shots should be given later, starting at 1 or 2 months.**



**Sometimes, 2 or more shots can be combined. Ask if combination shots are available.*

If a child did not get shots as a baby,

he or she should still get them. Your child may need shots to go to:

- child care
- camp
- school.



But don't wait until then. Your child needs shots now!

**Prenatal Parent Education and Parenting Skills Training Topic:
Immunizations**

Shots can hurt a little.

But they are worth it!



Ask your child's health-care provider what to expect after a shot.

Some side effects include:

- crankiness
- slight fever (see note)
- soreness or swelling where the shot was given.

Other problems are very rare.

Call your child's health-care provider right away if your child:

- has a high fever (see note)
- cries for more than 3 hours
- is hard to wake up
- has seizures
- goes limp or pale
- has other unusual symptoms.

Note: Call your health-care provider if your child is:

- under 3 months and has a rectal temperature of 100.4°F or higher
- 3-6 months and has a rectal temperature of 101°F or higher
- older than 6 months and has a rectal temperature of 102°F or higher.

Read the Vaccine Information Statement (VIS) for each shot your child gets. Your child's health-care provider is required to give you this statement.

Don't stop after 1 shot

Some shots must be given several times.

Make sure your child gets every dose! Even if your child feels a little sick, he or she can usually get a shot.

Ask about shots at each visit to your child's health-care provider.

Make an appointment for the next set of shots. Also, ask if your child—or any other member of your family—needs:

- "catch-up" shots (to make up for shots missed when he or she was younger)
- shots for those at higher risk, such as a yearly flu shot. (A nasal mist flu vaccine may be given to healthy people ages 5 to 49.)



**Prenatal Parent Education and Parenting Skills Training Topic:
Immunizations**

Keep track of all your child's shots.

Keep a record of all shots
your child gets. Bring it to each visit.
Keep the record in a safe place.

**You may need proof
your child has had shots**
before your child can go to child care
or school. Talk to your child's health-care
provider or local health department if:

- your child is in school
and hasn't had all needed shots
- you don't know which shots
your child has had.



Need help paying for shots?

**Your child may be able to
get shots and checkups at no cost**
—or at a very low cost.

For more information,
call your local:

- health department or clinic
- Social Security or Medicaid office.

Or contact the Centers for Disease Control
and Prevention:

- 1-800-CDC-INFO
(1-800-232-4636)
- 1-888-232-6348 (TTY)
- www.cdc.gov/nip.



Prenatal Parent Education and Parenting Skills Training Topic: Immunizations

Protect your child right from the start.

Immunization is the single most important way parents can protect their children against serious diseases.

If your child misses a shot, you don't need to start over, just go back to your child's doctor for the

	Birth	2 Months	4 Months	6 Months	12-15 Months	15-18 Months	19-23 Months	4-6 Years
Hepatitis B	✓	✓	✓	✓	✓	✓	✓	✓
Diphtheria, Tetanus, Pertussis (DTaP)	✓	✓	✓	✓	✓	✓	✓	✓
Haemophilus Influenzae B (Hib)	✓	✓	✓	✓	✓	✓	✓	✓
Poliovirus (Polio)	✓	✓	✓	✓	✓	✓	✓	✓
Pneumococcal Conjugate (PCV)	✓	✓	✓	✓	✓	✓	✓	✓
Measles, Mumps, Rubella (MMR)	✓	✓	✓	✓	✓	✓	✓	✓
Varicella (Chickenpox)	✓	✓	✓	✓	✓	✓	✓	✓
Hepatitis A	✓	✓	✓	✓	✓	✓	✓	✓
Rotavirus (RV)	✓	✓	✓	✓	✓	✓	✓	✓
Tetanus, Diphtheria, Pertussis (Tdap)	✓	✓	✓	✓	✓	✓	✓	✓
Meningococcal Conjugate (MCV)	✓	✓	✓	✓	✓	✓	✓	✓
Human Papillomavirus (HPV)	✓	✓	✓	✓	✓	✓	✓	✓
Influenza	✓	✓	✓	✓	✓	✓	✓	✓

Some of these vaccines may be given in combination, meaning fewer shots.

Each flu season starting at 6 months.

✓ Can be given as early as 12 months, if there is six months

Massachusetts immunization schedule is compatible with the current recommendations of the Advisory Committee on Immunization Practices (ACIP) of the Centers for Disease Control and Prevention (CDC), the American Academy of Pediatrics (AAP), and the Academy of Family Physicians (AAFP). For more information, please call the Massachusetts Department of Health and Senior Services Immunizations Program at 800.219.3224 or visit www.health.mn.gov.

EXHIBIT M**MISCELLANEOUS INFORMATION****Outside United States:**

If any products and/or services offered under this RFP are being manufactured or performed at sites outside the United States, the vendor MUST disclose such fact and provide details in the space below or on an attached page.

Are any of the vendor's proposed products and/or services being manufactured or performed at sites outside the United States?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
If YES, do the proposed products/services satisfy the conditions described in section 4, subparagraphs 1, 2, 3, and 4 of Executive Order 04-09? (see the following web link: http://s1.sos.mo.gov/CMSImages/Library/Reference/Orders/2004/eo_04_009.pdf)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
<p>If YES, mark the appropriate exemption below, and provide the requested details:</p> <p>1. <input type="checkbox"/> Unique good or service.</p> <ul style="list-style-type: none"> EXPLAIN: _____ <p>2. <input type="checkbox"/> Foreign firm hired to market Missouri services/products to a foreign country.</p> <ul style="list-style-type: none"> Identify foreign country: _____ <p>3. <input type="checkbox"/> Economic cost factor exists</p> <ul style="list-style-type: none"> EXPLAIN: _____ <p>4. <input type="checkbox"/> Vendor/subcontractor maintains significant business presence in the United States and only performs trivial portion of contract work outside US.</p> <ul style="list-style-type: none"> Identify maximum percentage of the overall value of the contract, for any contract period, attributed to the value of the products and/or services being manufactured or performed at sites outside the United States: <input type="text"/> % Specify what contract work would be performed outside the United States: _____ 		

Employee/Conflict of Interest:

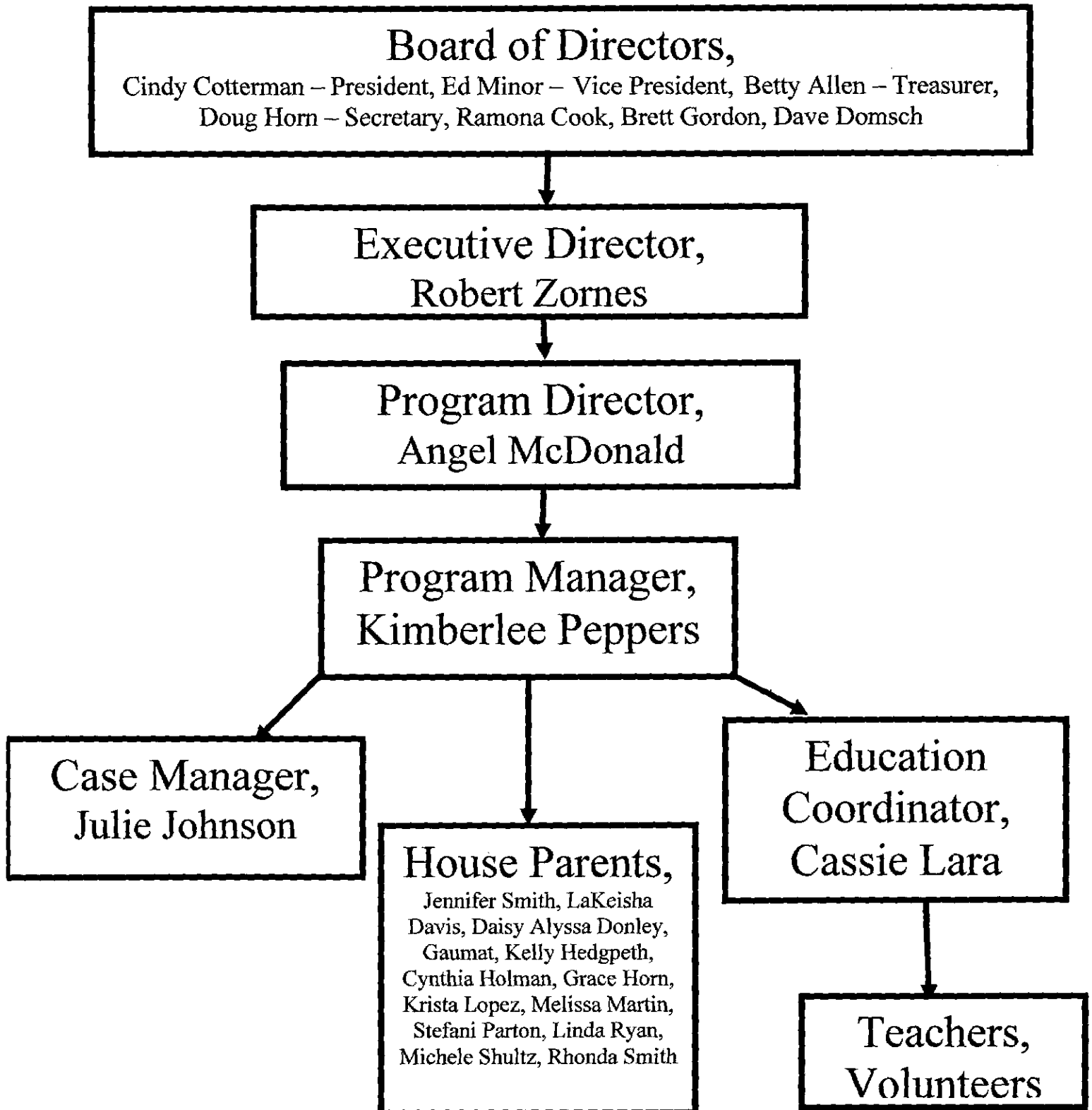
Vendors who are elected or appointed officials or employees of the State of Missouri or any political subdivision thereof, serving in an executive or administrative capacity, must comply with sections 105.450 to 105.458, RSMo, regarding conflict of interest. If the vendor or any owner of the vendor's organization is currently an elected or appointed official or an employee of the State of Missouri or any political subdivision thereof, please provide the following information:	
Name and title of elected or appointed official or employee of the State of Missouri or any political subdivision thereof:	None
If employee of the State of Missouri or political subdivision thereof, provide name of state agency or political subdivision where employed:	N/A
Percentage of ownership interest in vendor's organization held by elected or appointed official or employee of the State of Missouri or political subdivision thereof:	<input type="text"/> 0 %

EXHIBIT M, continued**Registration of Business Name (if applicable) with the Missouri Secretary of State:**

The vendor should indicate the vendor's charter number and company name with the Missouri Secretary of State. Additionally, the vendor should provide proof of the vendor's good standing status with the Missouri Secretary of State. If the vendor is exempt from registering with the Missouri Secretary of State pursuant to section 351.572, RSMo., identify the specific section of 351.572 RSMo., which supports the exemption.

<i>Charter Number (if applicable)</i> N00036786	<i>Company Name</i> Mother's Refuge
If exempt from registering with the Missouri Secretary of State pursuant to section 351.572 RSMo., identify the section of 351.572 to support the exemption:	

Mother's Refuge Organizational Chart 2016





State of Missouri ▾ Karen Herman ▾

Supplier Activity : RFP30034901700042 - Alternatives to Abortion Program Services for Office of Administration (Formal)

Notify selected suppliers

Show Vendors who have Viewed Solicitation Show All Vendors

Check All Uncheck All

Search: <input type="text"/>									
Select	Vendor Name	Solicitation First Viewed	Document(s) Accepted	Last Document Download Attempt	Addenda Viewed	Addendum Document(s) Accepted	Last Addendum Document(s) Download Attempt	Submitted Response	
<input type="checkbox"/>	A Plus In-Home Wellness LLC?	Aug 3, 2016 11:40 AM CDT	×	×	×	×	×	×	
<input type="checkbox"/>	Adoption and Foster Care Coalition of MO✓	Jul 18, 2016 9:35 AM CDT	×	×	Aug 11, 2016 2:08 PM CDT [1 OF 2]	×	×	×	
<input type="checkbox"/>	Affordable & Excellent Home Health Care?	Jul 26, 2016 3:52 PM CDT	×	×	×	×	×	×	
<input type="checkbox"/>	Alliance for Life - Missouri Inc.✓	Jul 18, 2016 10:24 AM CDT	Aug 17, 2016 9:52 AM CDT [11 OF 11]	Aug 17, 2016 1:05 PM CDT	Aug 25, 2016 8:40 PM CDT [2 OF 2]	Aug 25, 2016 9:00 PM CDT [4 OF 4]	Aug 18, 2016 4:12 PM CDT	Aug 26, 2016 10:21 AM CDT [9 OF 9] = 13	
<input type="checkbox"/>	Benjamin Foods LLC✓	Jul 18, 2016 1:57 PM CDT	×	Jul 18, 2016 1:57 PM CDT	×	×	×	×	
<input type="checkbox"/>	Caregivers World Inc.✓	Jul 18, 2016 9:19 AM CDT	×	×	×	×	×	×	
<input type="checkbox"/>	Catholic Charities of Southern Missouri✓	Aug 15, 2016 3:24 PM CDT	Aug 19, 2016 10:50 AM CDT [11 OF 11]	×	Aug 26, 2016 2:06 PM CDT [2 OF 2]	Aug 19, 2016 10:51 AM CDT [3 OF 4]	×	Aug 26, 2016 2:11 PM CDT [9 OF 9] = 0	
<input type="checkbox"/>	Child Center - Marygrove✓	Jul 16, 2016 11:13 PM CDT	×	Jul 16, 2016 11:13 PM CDT	×	×	×	×	

Select	Vendor Name	Solicitation First Viewed	Document(s) Accepted	Last Document Download Attempt	Addenda Viewed	Addendum Document(s) Accepted	Last Addendum Document(s) Download Attempt	Submitted Response
<input type="checkbox"/>	Close To Home Independent Living Skills✓	Jul 26, 2016 7:45 PM CDT	✗	✗	✗	✗	✗	✗
<input type="checkbox"/>	CSG Government Solutions✓	Aug 11, 2016 3:31 PM CDT	✗	✗	Aug 11, 2016 3:31 PM CDT [1 OF 2]	✗	✗	✗
<input type="checkbox"/>	Express Home Care LLC✓	Jul 22, 2016 10:14 AM CDT	✗	Aug 4, 2016 3:02 PM CDT	✗	✗	✗	✗
<input type="checkbox"/>	Faith Maternity Care✓	Aug 25, 2016 1:27 PM CDT	Aug 25, 2016 1:29 PM CDT [11 OF 11]	✗	Aug 25, 2016 3:06 PM CDT [2 OF 2]	Aug 25, 2016 3:18 PM CDT [4 OF 4]	Aug 25, 2016 3:07 PM CDT	Aug 26, 2016 10:46 AM CDT [9 OF 9] [9] = 28
<input type="checkbox"/>	GV Traindrem Consulting✓	Jul 25, 2016 11:15 AM CDT	✗	✗	✗	✗	✗	✗
<input type="checkbox"/>	I Regina Gourdine✓	Jul 15, 2016 7:30 PM CDT	✗	✗	✗	✗	✗	✗
<input type="checkbox"/>	KM Group LLC✓	Aug 2, 2016 10:50 AM CDT	✗	Aug 2, 2016 10:50 AM CDT	✗	✗	✗	✗
<input type="checkbox"/>	Laclede County Pregnancy Support Center✓	Jul 27, 2016 2:09 PM CDT	Jul 27, 2016 2:13 PM CDT [11 OF 11]	Aug 19, 2016 1:49 PM CDT	Aug 25, 2016 2:34 PM CDT [2 OF 2]	Aug 25, 2016 3:17 PM CDT [4 OF 4]	Aug 25, 2016 2:56 PM CDT	Aug 25, 2016 3:19 PM CDT [9 OF 9] [9] = 2
<input type="checkbox"/>	Lutheran Family and Childrens Services of Missouri✓	Jul 18, 2016 8:51 AM CDT	Jul 18, 2016 8:56 AM CDT [11 OF 11]	Jul 18, 2016 8:57 AM CDT	Aug 25, 2016 2:32 PM CDT [2 OF 2]	Aug 25, 2016 2:40 PM CDT [4 OF 4]	Aug 25, 2016 2:33 PM CDT	Aug 26, 2016 9:20 AM CDT [9 OF 9] [9] = 2
<input type="checkbox"/>	Midwest Foundation Supply✓	Jul 22, 2016 2:08 PM CDT	✗	✗	✗	✗	✗	✗
<input type="checkbox"/>	Mothers Refuge✓	Aug 2, 2016 2:10 PM CDT	Aug 2, 2016 2:50 PM CDT [11 OF 11]	Aug 22, 2016 1:56 PM CDT	Aug 11, 2016 2:37 PM CDT [1 OF 2]	Aug 11, 2016 2:55 PM CDT [3 OF 4]	✗	Aug 22, 2016 2:07 PM CDT [9 OF 9] [9] = 25
<input type="checkbox"/>	Nurses for Newborns✓	Jul 16, 2016 3:39 PM CDT	Jul 19, 2016 2:23 PM CDT [11 OF 11]	Aug 23, 2016 3:52 PM CDT	Aug 26, 2016 2:12 PM CDT [2 OF 2]	Aug 11, 2016 3:48 PM CDT [3 OF 4]	Aug 23, 2016 3:51 PM CDT	Aug 26, 2016 2:16 PM CDT [9 OF 9] [9] = 0

Select	Vendor Name	Solicitation First Viewed	Document(s) Accepted	Last Document Download Attempt	Addenda Viewed	Addendum Document(s) Accepted	Last Addendum Document(s) Download Attempt	Submitted Response
<input type="checkbox"/>	OAKWOOD PACKAGING COMPANY ✓	Aug 22, 2016 3:59 PM CDT	×	×	Aug 22, 2016 3:59 PM CDT [1 OF 2]	×	×	×
<input type="checkbox"/>	Parthenia M Reading ✓	Aug 20, 2016 3:06 PM CDT	×	×	Aug 20, 2016 3:06 PM CDT [1 OF 2]	×	×	×
<input type="checkbox"/>	Repucare, Inc. ✓	Jul 18, 2016 9:18 AM CDT	×	×	×	×	×	×
<input type="checkbox"/>	Saam ?	Jul 15, 2016 7:19 PM CDT	×	×	Aug 25, 2016 9:46 PM CDT [2 OF 2]	×	×	×
<input type="checkbox"/>	SSM Health DePaul Hospital - St Louis ✓	Aug 2, 2016 1:11 PM CDT	×	×	×	×	×	×
<input type="checkbox"/>	Taylor Consulting LLC ✓	Jul 16, 2016 8:21 AM CDT	×	Jul 16, 2016 8:21 AM CDT	×	×	×	×
<input type="checkbox"/>	Tech Electronics, Inc. ✓	Aug 3, 2016 11:47 AM CDT	×	×	×	×	×	×
<input type="checkbox"/>	The Haven of Grace ✓	Jul 19, 2016 9:56 AM CDT	Jul 26, 2016 2:00 PM CDT [11 OF 11]	Aug 17, 2016 2:25 PM CDT	Aug 25, 2016 2:36 PM CDT [2 OF 2]	Aug 25, 2016 3:29 PM CDT [4 OF 4]	Aug 25, 2016 3:26 PM CDT	Aug 26, 2016 10:19 AM CDT [9 OF 9] [1] = 1
<input type="checkbox"/>	The LIGHT House Inc. ✓	Aug 12, 2016 7:21 AM CDT	Aug 25, 2016 3:11 PM CDT [11 OF 11]	×	Aug 25, 2016 2:56 PM CDT [2 OF 2]	Aug 25, 2016 3:11 PM CDT [4 OF 4]	Aug 25, 2016 3:05 PM CDT	Aug 26, 2016 2:20 PM CDT [9 OF 9] [1] = 0
<input type="checkbox"/>	Washington County Community 2000 Partnership, Inc. ✓	Jul 18, 2016 4:56 PM CDT	×	×	×	×	×	×
Showing 1 to 30 of 30 Vendors								
<p>Note: A date in the Accepted Document(s) indicates that the vendor has accepted one or more of the documents.</p> <p>A date in the Accepted Addendum(s) column tracks the last time the vendor has accepted an addendums document(s).</p> <p>Activity for vendors responding via fax or paper cannot be represented on this screen.</p>								
<div>First Previous 1 Next Last</div>								